

SAINT JOHN NEUMANN
Catholic Church

EVENT/MEETING REQUEST FORM-2018

Event Name: _____ Group Size: _____

Start Date: _____ Start Time: _____ Time needed for setup: _____

End Date: _____ End Time: _____ Time needed for cleanup: _____

____ One Time Event ____ Recurring Event ____ Consecutive Days Event

Please check the requested room(s) below:

____ Faith & Family Center (FFC)	FFC Room	____A	____B	____C
____ Faith & Family Center: Kitchen	____ Faith & Family Center Nursery			
____ Faith & Family Center: Classroom	FFC Classroom # requested _____			
____ Parish Office: Classroom	Parish Office Classroom # requested _____			
____ Parish Office: Conference Room	____ Parish Office: Kitchen			
____ Church	____ Neumann Room			

This event occurs on:

____ Sunday ____ Monday ____ Tuesday ____ Wednesday ____ Thursday ____ Friday ____ Saturday

Week of the Month:

____ Every ____ Last ____ Alternate ____ 1st ____ 2nd ____ 3rd ____ 4th ____ 5th

If this is a recurring event, please list dates that you will not be meeting below: Example; 12/24, 12/25, 12/31, 1/1

Contact Name: _____ Contact Telephone #: _____

Contact Email Address: _____ Date Form Submitted: _____

If any AV equipment will be needed for this event, please be sure to submit the AV Request form to Andy and Ryan at least two weeks before your event.

****It is the responsibility of each group to restore the room to its original condition upon conclusion of the meeting.***

Garbage should be bagged and placed in the outside dumpsters. Lights should be turned off when done.

Food is allowed only in the tiled areas of the building.

Thank you!

- Libby Muhoberac & the SJN Facilities Team