

## St. Elizabeth Seton Facility Request Form

To schedule a meeting or event, please provide the following information:

### Meeting Details --

Room(s) [Circle Preference]	<b>Parish Center Upper Level:</b> Fireside Room, Social Hall <b>Parish Center Meeting Room:</b> 2, 3, 4*, 5, 6, Small Conf. Room <b>Conference Center Room:</b> CC1, CC2, CC3, CC4, or Patio Room <b>Church                      Kiosk</b> *Children
# of People Expected	Minimum # -- Maximum #:
Sponsoring Organization	
Contact Information	Name: Telephone: Email Address:
Notes/Comments (Other Facility Needs (e.g.: Kitchen Services, A/V Equipment, Storage, etc.)	

### If this is a one-time meeting or event --

Date	
Start Time / End Time	

### If this is a recurring meeting or event--

Start Month and Year	
End Month and Year	
Day of Week	
How Often (e.g.: Every Week, Every 2nd Week, 1st Wed. of the Month, etc.)	
Start Time / End Time	

### If this is a multi-day meeting or event --

Start Date / End Date	
Start Time / End Time	