

**St. Clare Catholic Parish**  
**Room Reservation Form 2025-2026**  
(PLEASE COMPLETE, SIGN, AND EMAIL TO: OFFICE@STCLAREROSEVILLE.ORG)

OFFICE USE ONLY	
Date received_____	
Initials_____	
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Initials_____	

**Booking Details:**

Today's Date: \_\_\_\_\_ Ministry/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Event Details:**

Event/Meeting Name: \_\_\_\_\_

Check how often you will be using: **Once** ☐ Preferred Date \_\_\_\_\_**Weekly** ☐ Preferred Day: \_\_\_\_\_ **Monthly** ☐ Preferred Day \_\_\_\_\_**Start Date:** \_\_\_\_\_ **Start Time** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **End Time** \_\_\_\_\_

Set-up Start Time \_\_\_\_\_ Clean Up Time \_\_\_\_\_

**Additional Coordination:**

Answering "yes" to any of these questions requires additional paperwork, approval, and planning.

Will you charge for this event? Yes ☐ No ☐ If so, what will the charge be? \_\_\_\_\_

Please fill out a "Fundraiser Request Form" for this event. Fundraiser request approval is required before event will be booked.

**Facility Requested:**Please check ☒ the facility needed**Church**Church (1152 max.) ☐ Narthex ☐ St. Clare Room (161 max.) ☐ Church Parking Lot ☐**Morris Center**Morris Center, East (294 max. / 120 seated) ☐ LaSalle Room (43 max.) ☐Morris Center, West (294 max. / 120 seated) ☐ St. Francis Room (43 max.) ☐Morris Center Plaza ☐**Evangelist Center**St. Matthew Room (42 max.) ☐ St. Mark Room (42 max.) ☐St. Luke Room ☐ St. John Room ☐**Kitchen(ette)**Morris Center Kitchenette ☐ Morris Center Kitchen ☐ St. Clare Room Kitchenette ☐

(continued →)

**Room Set-Up:**

Please check ☒ the set-up needed:

***Note: Due to increase use of facilities, any ministry group that is able to offer set-up assistance help is always appreciated.***

Ministry Will Set Up ☐ \*St. Clare Team to Set Up\* ☐ No Set Up Required ☐

Auditorium Style ☐ Banquet Style ☐ Classroom Style ☐

Meeting Style ☐

- ☐ Single rectangle table (seats 6-8)
- ☐ Double rectangle tables - pushed together (seats 10-12)
- ☐ Square shape - 4 rectangle tables (seats 12-16)
- ☐ U-shaped- 4 or 6 rectangle tables (18+)

Expected Attendance: \_\_\_\_\_

Number of round tables (Seats 8 people per table) \_\_\_\_\_

Number of long, 6'/8' rectangular tables (Seats 8/10 people per table) \_\_\_\_\_

Number of Chairs: \_\_\_\_\_

Special Set-up Instructions: \*-Requires Layout Arrangement

**Technology Needs: *(Training required at least two weeks before event date)*****Audio-**

CD Player ☐ Microphone ☐

**Video**

DVD Player ☐ TV/Projector ☐ Laptop Cables (HDMI/VGA) ☐

**Other**

Wireless Internet (Wifi) ☐

Other Technology/Equipment Needs:

Signature of contact person for this event: