

Immaculate Conception Catholic Church

Scheduling Request Form

Today's Date:			
Event :			
Organization:			
Contact Person:			
Address:			
Phone:		Email:	

Which facility do you want to use? If you need 2 facilities for the same event and have the same times you can use the same form, but for different times or different events, please use an additional form.

First Choice:	
Second Choice:	

Which Dates do you require for this year?

What time will your Activity begin and end?

Begins:	am or pm	Ends:	am or pm
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How much Set Up time do you require?

Clean Up Time Required?

Minutes or Hours		Minutes or Hours	
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Office Use Only:

Received Date: _____

Posted: _____

Conflict: _____