

SET UP REQUEST FORM

Please put this in the custodian's mailbox across from the office a week in advance of the event.

**MAKE SURE THE DATE OF YOUR EVENT AND ROOM AVAILABILITY
HAS BEEN CLEARED THROUGH THE CHURCH OFFICE.**

Name of Group _____

Contact Person _____

Phone Number/Email of Contact Person _____

Date and Time _____

Room/Rooms Desired _____

Number of People Expected _____

Kind of Set-up Desired (number of tables, chairs, etc.) _____

(Draw Diagram below if necessary)