



St. John the Evangelist Facility Use Form

Please use this form to request use of facilities at **St. John the Evangelist** from January 1, 2026 through December 31, 2026. It is important to fill out this information exactly and completely and return to the parish office as soon as possible.

Organization: _____

If you wish to request a specific room, please circle any that apply below. All requests are subject to availability (The parish office will make final determination based on event needs and concurrent events with other parish organizations).

Rm A Rm B Rm C Rm D Rm E Rm G Rm K Rm F Fireside Rm Library Church Narthex Vogel Hall Kitchen

What frequency (daily, weekly, monthly, 2nd Tuesday, etc.) or one time only? _____

Any exceptions to the frequency? (certain dates, months, etc.) _____

What date(s) do you require? From: _____ To: _____

What day of the week? _____

What time do you need? **Event begins at:** _____ **Event ends at:** _____

Setup will take place: _____ **Cleanup will require** _____ **minutes after event ends**

Event Name: _____ # of participants anticipated _____

Brief description of event: _____

Will you require use of the kitchen? _____

Will you require use of childcare space? _____

If food will be served, list type of refreshments _____

Alcoholic beverages to be served? YES/NO

If YES, Liquor license/bartender is required. Copy of license must be submitted along with this form.

Contact Person: _____

Address: _____

City/State: _____

Phone: _____

E-mail: _____

IMPORTANT:

Please make sure the room is left the way you found it with chairs and tables arranged per diagram in room or neatly put away. Please follow checklist for cleanup. Clean all table surfaces, sweep and mop floor, etc.

**Kitchen Users:
Aprons & Dirty clothes
Must be taken home
to be cleaned.**

If there are any changes to this request, please contact the office at (360) 573.3325 as soon as possible, as this allows us to make the space available to others or check for conflicts. This includes cancelled meetings or time. Please note: Scheduling is done on a year-to-year basis. Regularly scheduled meetings / event requests must be renewed annually in January. You will receive confirmation via email. You will be informed if WE have to make any changes to the already scheduled event you requested as Liturgy, Faith Formation, Sacraments, Funerals, OCIA are priorities.

Office use only

Date Received: _____ (Legend: NA = not applicable ✓ = received and ok)

Use Agreement: _____ Liability Ins: _____ Liquor License: _____

Date Completed: _____ Reviewed by (office staff) _____