

# Saint Monica Facility Reservation Form

Revised Oct. 15

Event \_\_\_\_\_

Organization \_\_\_\_\_

Contact Person:

Name \_\_\_\_\_

*A NEW Form Must be  
completed for each and every  
different type of meeting,  
event, or activity*

Phone Number (\_\_\_\_\_) \_\_\_\_\_ Day Time  
(\_\_\_\_\_) \_\_\_\_\_ Night Time

Facility Requested \_\_\_\_\_  
(Room/s, Building, Grounds)

Date \_\_\_\_\_ Start time of Event: \_\_\_\_\_

Completion Time of Event \_\_\_\_\_

Set Up Time Needed by self: Y or N Date \_\_\_\_\_ Start Time \_\_\_\_\_ Finish Time \_\_\_\_\_

If any additional set up is needed, there is a maintenance request form on the reverse side to be completed.

**Additional Dates Requested for same activity: ex. GOF:**

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

For Office Use Only

Date Received \_\_\_\_\_

Date Posted: Computer \_\_\_\_\_