



# Our Lady of Perpetual Help Church Lindenhurst, New York

## REQUISITION FOR USE OF PARISH FACILITIES

Date: \_\_\_\_\_ Ministry: \_\_\_\_\_

Event Title: \_\_\_\_\_

Brief Event Description: \_\_\_\_\_

Briefly list all equipment needed (*audio, visual, tables, chairs, etc.*):

Will you be submitting special setup needs? *If yes, submit a diagram to Scheduler Coordinator two weeks prior.*

Name of Person Responsible for Event: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_

Facility/Facilities Requested: \_\_\_\_\_

*Indicate your preference. Acceptance will be based on availability of space.*

Expected number of people to attend: \_\_\_\_\_

### One Time Event

Day of the Week: \_\_\_\_\_ Date of the Event: \_\_\_\_\_  
*Mon./Tue./etc. Month/Day/Year*

Time of the Event: From: \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

How much time is needed for setup? \_\_\_\_\_ mins. How much time is needed for cleanup? \_\_\_\_\_ mins.

### Recurring Events

Please describe the frequency of the event below:  
*(for example "Sun. 3/23/08, Mon 3/24/08 and Fri 03/25/08 or "the event will occur daily M/W/F each week" or "the event will occur weekly on Fri" or "the event will occur on the 1st & 3rd Tues..." etc.)*

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
*Month/Day/Year Month/Day/Year*

Time of the Event: From: \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

How much time is needed for setup? \_\_\_\_\_ mins. How much time is needed for cleanup? \_\_\_\_\_ mins.