



Holy Spirit Catholic Church

Room Reservation Form

(* Must be completed prior to booking)

*Group's Name: _____

*Event Name: _____

*Day & Date: _____

*Time (including setup and clean up) **: _____

*Time of event: _____

Room: _____

(Room is subject to availability. HSCC will make every effort to reserve an alternate room to accommodate your function if the room you request is not available.)

*Show on web calendar? Yes No

Room Set Up:

*Specific rooms (i.e. classroom) have designated set ups. If you need additional furniture, or a special arrangement of furniture, you are responsible for that set up. You will also be responsible for returning the room to its original set up. ****Please allow enough time in your reservation for the movement of furniture.** No tape of any kind is to be used on the walls or doors. All decorations and signs must be removed at the end of your event.*

_____ *Initial here that you will adhere to this policy.

Will you be arranging furniture? Yes No

*Furniture needed: _____

*# of People Attending: _____

*Audio/Visual Equipment: _____

(i.e. TV, VCR, microphones, easels, etc.)

*Food:

Will have a caterer? Yes No If so, who? _____

(See list of approved caterers)

*Will you use the kitchen? Yes No

If yes, you will need a Kitchen Checklist. You can get one from the receptionist.

*Contact Name: _____ Phone: _____

*Email address: _____

Would you like to be sent a confirmation of the booking via email? Yes No

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FOR OFFICE USE ONLY

Date Received: _____

Received By: _____

Date Booked: _____

Room same as requested? No: _____