



Today's Date \_\_\_\_\_

**REQUEST FOR SCHEDULING CATHEDRAL FACILITIES**

(All Scheduling must be in writing)

**LOCATION REQUESTED: (PLEASE MARK WITH AN "X")**

Cathedral \_\_\_\_\_ Emmanuel Chapel \_\_\_\_\_ St. Joseph Hall \_\_\_\_\_

Classroom (please circle 1, 2, 4, 7, 8) \_\_\_\_\_ Courtyard \_\_\_\_\_

Is this a Parish Organization making the request? **Yes** \_\_\_ **No** \_\_\_

Event Date	
Beginning Time	
Ending Time	
Name of Event	
Person Responsible	
Phone Number	
Email address	

**Please complete and mail to:**

**505 N. Upper Broadway  
Corpus Christi, TX 78401**

**Fee to use St. Joseph Hall is \$100.** Groups using the hall are required to take care of cleaning.

**Fee to use the classrooms is \$50 per room or \$100 monthly if using weekly.** Groups using rooms are required to take care of cleaning. **Facilities must be left as found.**

**\*All reservations are subject to CANCELLATION should the Bishop require the facility requested.**

Upon receiving your request and approval, a member of the staff will inform you by email to confirm your reservation.

**Office Use Only:**

Received on \_\_\_\_\_

Initials of person receiving \_\_\_\_\_

Approved on \_\_\_\_\_

Initials of person approving \_\_\_\_\_

Confirmed on \_\_\_\_\_

Person contacting requester \_\_\_\_\_