

**The Church of St. Patrick**  
**137 Moseman Road ♦ Yorktown Heights, NY ♦ 10598-4806**  
**FACILITIES USE/SET-UP**

DAY AND DATE OF FUNCTION: \_\_\_\_\_

CHURCH CALENDAR OPEN (for Parish Secretary): \_\_\_\_\_

(Tentative until Pastor approves):

BOOKED \_\_\_\_\_

INSURANCE CERTIFICATE REQUIRED:    (    ) YES    (    ) NO

IT IS UNDERSTOOD THAT:

1. All Parish Center Hall, Family Education Center & Gym events **MUST** be completed no later than 9:00PM.
2. All Stone Church and Lower Level of Stone Church events **MUST** be completed no later than 8:00PM.
3. All lights must be turned out, bathrooms checked, windows closed and door locked before leaving premises.
4. Floor must be swept and all litter picked up.
5. All props, equipment, posters, decorations, etc., must be removed.
6. Please **DO NOT TAPE** decorations to the walls.
7. If the event is cancelled, please notify the parish secretary.
8. All speakers must be approved by Pastor before being invited.
9. An annual donation to defray costs would be appreciated.

Group/Organization: \_\_\_\_\_

Activity planned: \_\_\_\_\_

Event Date: \_\_\_\_\_ Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Set Up Date: \_\_\_\_\_ Set Up Start Time: \_\_\_\_\_ Set Up End Time: \_\_\_\_\_

Name of speaker, if any: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

Facilities requested: \_\_\_\_\_

Custodial requirements (number of tables, chairs, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Use reverse of form for set-up diagram.

\_\_\_\_\_  
(Signature of contact person) (Date)

Pastor's Approval: \_\_\_\_\_

(Signature)

(Date)

\*This is only an application. It is not approval. You will be notified if you are approved.