For Office Use Only

Date Received
Date Entered
Entered by

E-mail Confirmation

Reservation No.

ST. MATTHEW CATHOLIC CHURCH
FACILITY REQUEST

Ministry

Name of Event

Day
- ☐ Sunday
- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday

Date(s)

Event Start ○ am ○ pm

Event End ○ am ○ pm

Set up ○ am ○ pm

Clean up ○ am ○ pm

Building

Room

Event Type

Number expected

Contact Name

Phone

E-mail

Audio/ Visual Support ○ yes ○ no

It is the responsibility of the requestor to contact the church office regarding A/V support.

Requestor

Date

Reserving a room in any of the parish facilities implies agreement to abide by the guidelines set forth in the Facilities Scheduling Policy. For security reasons and to best serve all ministries, if an event is cancelled, you must notify Erin Dunne at the Church Office at 704-543-7677 Ext. 1031. Thank you!

Please complete and return this form as an attachment to erind@stmatthewcatholic.org.