Sacred Heart Facility Request

Ministry: ______________________________________________ Date: ______________

Contact: ______________________________________________

Phone Number: ________________________________________

Type of Request - Please check one           Group Size: ______________

One Day Meeting/ Event: ___

Date: _______ Time: _________________ Room: _____________________________
*Please include set-up & Clean-up in Time

Reoccurring Meeting: ___

Day: _______ Time: _________________ Room: _____________________________
Starting Date: ___________ Ending Date: ______________
*Please include set-up & Clean-up in Time

Church Entrance: _____

Informational: _____ Fundraiser: _____

Date: _______________________ Time: ________________________________________

For office use

Approved By: ______________________________________ Date: _____________________________

Date Entered in System: ______________

Keys Needed: ___________________________

Access Programed: ___________________________________________________________________

Work Order Needed: ____________________