	Facilit	ties Requ	est Form	for a P	arish Ad	ctivity	/Meeti	ng(s)	(9/1/24)
Ministry:									
Person Filling O	out This F	orm:							
Phone:			Email:						
Activity Descrip	otion:								
Meeting Freque	ency (plea	se circle)	Once V	Veekly	Month	ly Ye	early		
Meeting Date(s)):			S1	art Time:		am/pm	End Time:	am/pm
Anticipated Set	-up Time):			Est	timate	d Numl	er of Peop	le:
Use Applia	ances? \	or P/C 1 & : YES NO YES NO	stove	dishw	asher	refrige	erator		
Kitchenwa	are? Y	YES NO	large	e plates	, small	plate	s, bow	ls, napkii	1s,
			ŀ	not cup	s, cold	cups,	silverv	/are	
Need help loo	cating kit	chenware?	YES NO	O If yes event.	, Martha	Bober	will co	ntact you p	rior to your
AV Equipment?	projec	ctor TV	microph	nones	big scr	een	podiu	m	
	other_								
**If Cullen Hall i									
For staff use:									
	Date ap	proved:							
Leader notifie	ed of appi	roval:				_by			

	Parish Center Rooms 1 & 2 (off of atrium) Preferred type of tables: Round or Rectangle	
	Cullen Hall setup (like Donut Sunday setup)	
	8 ft 8 ft doors storage room 8 ft 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	Cullen Hall special setup – Draw a diagram	
Partie.	Kitchen hainknauc doors doors	
	PC rooms 1+2	storage room Stage