

ST. MARY OF THE ASSUMPTION PARISH
1 St. Mary's Hill, Lancaster, NY 14086

BUILDING REQUEST FORM

ORGANIZATION

Total # of Participants _____ Total # of St. Mary's Participants _____

CONTACT PERSON _____ phone _____ email _____

ROOMS AND TIMES REQUESTED:

DATES: _____ NAME OF EVENT: _____

ROOM: _____ START TIME: _____ END TIME: _____

Additional Set Up Time: _____ (minutes) Take Down Time: _____ (minutes)

ROOMS AND TIMES REQUESTED:

DATES: _____ NAME OF EVENT: _____

ROOM: _____ START TIME: _____ END TIME: _____

Additional Set Up Time: _____ (minutes) Take Down Time: _____ (minutes)

ROOMS AND TIMES REQUESTED:

DATES: _____ NAME OF EVENT: _____

ROOM: _____ START TIME: _____ END TIME: _____

Additional Set Up Time: _____ (minutes) Take Down Time: _____ (minutes)

ADDITIONAL COMMENTS OR NEEDS: Please list here any items that the custodial staff is expected to get for you. If the custodial staff is expected to help your organization set up because of infirmity of members, please specify what needs to be done.

I understand that the entrance door cannot be left open at any time; a responsible person must let in the participants. I understand that the facility must be put back into the condition in which it was found or better. I understand that failure to do so may result in future restriction of use of the facility. I am aware that any damage must be immediately reported to maintenance. If there is an accident, I am aware that an accident report must be completed in a timely manner. I know that event cancellations must be reported to the rectory.

Signature of Contact Person _____ Date _____

Authorized by _____

Sports Groups that are not part of the school's programs are required to provide a \$100 security deposit (returnable after all sessions are completed). They will be charged a fee per session for use of a facility.