

Our Lady of the Woods - Meeting Space Request Form

Must be submitted a minimum of 7 days prior to Date of Event

Please Complete and Return to Parish Office
or Email Form to: parishoffice@ourladyofthewoods.org

Today's Date: _____

Day and Date of Event: _____

Name of Ministry/Group: _____

Purpose of Event: _____

Responsible Staff/Ministry Person: _____

Set-up Time before Meeting Start (if needed): _____

Meeting Time-Start and End: _____

Room/Site Requested (if preference): _____

Number of Adults: _____ Number of Children: _____

Number of Chairs: _____ Number of Tables: _____

Audio/Visual: Podium/Microphone Digital Projector Screen TV/DVD
 Laptop Speakers

Requestor/Contact Person Name, Phone, Email: _____

Other (Special Layout, needs, etc.): _____

Additional Instructions: Email Separate Attachment

Hospitality Supplies Needed for Event YES NO

(Please "click" boxes as necessary) Supplies will be left in the Hospitality Kitchen

Coffee YES NO

Coffee Brewer YES NO

Coffee Carafe YES NO Qty. ____

Water Pitchers YES NO Qty. ____

Platters YES NO Qty. ____

Sugar YES NO

Powered Cream YES NO

Cups YES NO Qty. ____

Juice Glasses YES NO Qty. ____

Paper Plates YES NO Qty. ____

Napkins YES NO Qty. ____

Sweet & Low YES NO

Office Use Only

Calendar Entry

YES NO

BY _____

Date _____

Copy To:

Shelly

Ron

John M. (hospitality)

Brian S. (insurance)

Maintenance

BAS System _____

Initial _____

****If Necessary to Cancel Meeting – Contact Parish Office at 708-361-4754****