



Our Lady of the Woods - Meeting Space Request Form

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

INSTRUCTIONS: 1. Download Form 2. Open with Adobe Reader® 3. Click “Fill & Sign” to complete 4. Save and Email to: parishoffice@ourladyofthewoods.org OR Complete and return to Parish Office.

Today’s Date: _____

Day and Date of Event: _____

Name of Ministry/Group: _____

Purpose of Event: _____

OLW Staff/Ministry Person: _____

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

Meeting Time-Start and End: _____

Room/Site Requested (if preference): _____

Special Room Layout: _____

Number of Adults: _____ **Number of Children:** _____

Number of Chairs: _____ **Number of Tables:** _____ **Long** _____ **Round**

Wireless Microphone (available Gather Space, 108A/B and 118):

Digital Projector: **DVD:** **Laptop Computer:** **Mac®/Other Adapter/Cable:**

Requestor/Contact Person Name/Phone: _____

Email: _____

Other (Special 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**

Powdered 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**

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

Office Use Only	
Calendar Entry	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
BY _____	
Date _____	
HVAC Entry	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
Copy to:	
<input type="checkbox"/> Shelly	
<input type="checkbox"/> Ron	
<input type="checkbox"/> John M. (hospitality)	
<input type="checkbox"/> Shelly (insurance)	