

# Saint Monica Facility Reservation Form

Revised Oct. 15

Event \_\_\_\_\_

Organization \_\_\_\_\_

Contact Person:

Name \_\_\_\_\_

*A NEW Form Must be  
completed for each and every  
different type of meeting,  
event, or activity*

Phone Number (\_\_\_\_) \_\_\_\_\_ Day Time

(\_\_\_\_) \_\_\_\_\_ Night Time

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Facility Requested \_\_\_\_\_

(Room/s, Building, Grounds)

Date \_\_\_\_\_

Start time of Event: \_\_\_\_\_

Completion Time of Event \_\_\_\_\_

Set Up Time Needed by self: Y or N Date \_\_\_\_\_ Start Time \_\_\_\_\_ Finish Time \_\_\_\_\_

If any additional set up is needed, there is a maintenance request form on the reverse side to be completed.

**Additional Dates Requested for same activity: ex. GOF:**

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

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For Office Use Only

Date Received \_\_\_\_\_

Date Posted: Computer \_\_\_\_\_

# MAINTENANCE REQUEST

Requested by: \_\_\_\_\_

Teacher's Name \_\_\_\_\_ Grade \_\_\_\_\_ Room \_\_\_\_\_

Class Lunch Time \_\_\_\_\_

Today's Date \_\_\_\_\_ Time \_\_\_\_\_

What needs to be done: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When must work be completed? (Date) \_\_\_\_\_ (Time) \_\_\_\_\_

\_\_\_\_\_

Approved by \_\_\_\_\_

Special Instructions: