



ST. THOMAS THE APOSTLE  
PARISH / SCHOOL  
ROOM REQUEST FORM

Ministry: \_\_\_\_\_

Event: \_\_\_\_\_ Date: \_\_\_\_\_

Set-up Time: \_\_\_\_\_ Start /End time of event: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Email address: \_\_\_\_\_

Room request: (Please request the room according to the size of your event)

\_\_\_\_\_ John Paul II Room (20 people or less)

\_\_\_\_\_ Small Conference Room in Pastoral Center (10 people or less)

\_\_\_\_\_ Large Parish Room (30 people or more)

\_\_\_\_\_ Chapel

\_\_\_\_\_ Auditorium

\_\_\_\_\_ Church

\_\_\_\_\_ Additional needs: TV / DVD / VCR / MICROPHONE, etc...

**THIS FORM MUST BE DROPPED OFF AT THE PASTORAL CENTER,**

**TO THE ATTENTION OF: JUSTIN CONNORS**

**AT LEAST ONE MONTH PRIOR TO THE EVENT FOR APPROVAL**

**JUSTIN WILL LET YOU KNOW IF ROOM REQUEST IS APPROVED.**

**If a special layout is needed for your event, please draw the layout on back or attach a separate layout sheet.**