

# St Gabriel Fellowship Hall Set Up Request

*Please complete this form and return it to the parish office  
at least **ONE WEEK** prior to your event.*

Date Needed: \_\_\_\_\_

Group Reserving Room: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
*(Include preparation time needed for decorations in start time.)*

Approximate Size of Group: \_\_\_\_\_

Do you require the use of the entire hall? \_\_\_\_\_

Could it be shared? \_\_\_\_\_

Do you require the hall to be set up for you? Yes \_\_\_\_\_ No \_\_\_\_\_  
*If Yes, please include a drawing of the set up on the back of this page.*

Please specify other needs you may have:

- Will you be using the kitchen? Yes \_\_\_\_\_ No \_\_\_\_\_
- Microphone / podium? Yes \_\_\_\_\_ No \_\_\_\_\_
- TV / VCR / DVD stand? Yes \_\_\_\_\_ No \_\_\_\_\_
- Other: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_