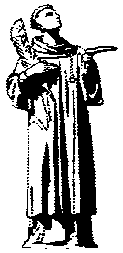
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**1441 W. Oakwood Road**

**Oak Creek, WI 53154**

**(414) 762-0552**

**Saint Stephen Catholic Church**

**Church**

**Facilities Usage Agreement**

Date of Application: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Event Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Purpose of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person Making Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Event Contact Person contact info  Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_

Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best time: \_\_\_\_\_\_\_\_\_

Space Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your event require heating or cooling? Do you need the campus opened and locked for your event \_\_\_\_\_\_

**FACILITY USAGE APPROVAL PROCESS**

1. Committee/parishioner must seek and obtain the approval and signature of their appropriate Staff Liaison or Director before submitting their request for a date and facility.
2. The Parish centralized calendar system is used for the scheduling of facilities. Request for use of facilities must be made *WELL IN ADVANCE*. Submission of a request *DOES NOT* guarantee availability of a facility.
3. The “Facility Request Scheduling Form” is available on the St Stephen website, at the parish office, and by email. It must be completed and submitted to the parish office, preferably by *ONE MONTH* in advance of the requested date.
4. Tobacco products are not permitted to be used in the church buildings. Smoking is permitted outside at discreet locations with cigarette and/or cigar butts’ disposed properly. Illegal drugs will not be permitted.
5. The facility space will be returned to the original way it was set up. Abuse of any equipment, facilities, or property of St Stephen will not be permitted.
6. Cleaning of all tables, chairs, counters, and floors is the responsibility of those using the space. All garbage should be removed.
7. Decorations, posters, filers, etc., may not be affixed in a manner that may damage church property and must be removed after the event.
8. When requesting the commons for a special event, and alcohol will be offered, there is a fee of $95 to Catholic Mutual for proper insurance coverage. There is an insurance rider that must be completed before the date of your event.
9. Pre-scheduled events may be canceled, pre-empted or re-scheduled, if emergencies arise. Let the parish office know as soon as possible.

**- Please Read Carefully, Sign and Date -**

I have read and agree to abide by the policies and procedures stated within. I understand the above listed charges are what is anticipated based upon what I have outlined and requested in this application form and understand if additional facilities, custodial/technical support, or equipment is requested by me or my agent, my group will be responsible for any additional charges incurred. I also understand that changes to these submitted requests are not permitted unless brought to the attention of and with the approval of the appropriate church staff.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICE USE ONLY:**

Date Accepted/Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Added to Digital Calendar \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Copies:\_\_\_ Pastor \_\_\_Bus. Man. \_\_\_