

Holy Trinity Parish Hall
Scheduling
Meetings

Organization: _____

Facility
Requested: _____

Date
From: _____ to: _____

Time
From: _____ to: _____

Frequency: _____
(ie: every third Wednesday)

Person responsible for Key pick-up and clean-up:

Name: _____

Phone: _____

Signature: _____

Date: _____

OUR PARISH HALL IS A REFLECTION OF OUR HOLY TRINITY PARISH. AFTER YOUR EVENT, PLEASE LEAVE THE KITCHEN/ MEETING ROOMS CLEAN. IF YOU HAVE FOUND YOUR REQUESTED FACILITY IN A DISORDERLY OR POORLY CLEANED FASHION. PLEASE LET US KNOW.