

## St. Aloysius Room Reservation Form

Room Requested (Circle)	Date Requested	Set Up Time	Meeting Time (Beginning - End)	Clean Up Time
Stapleton Hall - A				
Stapleton Hall - B				
Maple Street Room				
Other room: ( _____ )				

Person/society reserving space: \_\_\_\_\_

Purpose of Meeting: \_\_\_\_\_

Name of person responsible: \_\_\_\_\_

Phone #: \_\_\_\_\_

Person opening and locking building (who has a key) \_\_\_\_\_

Will the kitchen be used? Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Caterer \_\_\_\_\_

**Set up requested:** Please describe (or draw) how room should be set; how many tables (Round / Rectangle); number of chairs per table, etc.

This event is (please check):     New     Revised     Cancelled  
 Date submitted \_\_\_\_\_