



### St. Mark Catholic Center

### Facility Use Application- For non-SMCC Personnel

Parish/Organization:

Responsible Person on site:

Responsible Person's Address:

E-mail:

Phone Number/s:  Cell:

Contact Person's Name:

E-mail:

Phone Number/s:  Cell:

Date of Function:  Purpose of Event:

Number of Persons:  Start Time:  am pm End Time:  am pm

Caterer Being Used?  Yes  No

Name of Caterer:  Caterer Phone:

Room/s Desired:

Further Remarks or Requests:

I have been furnished a copy of the St. Mark Catholic Center Building Use Policies. I have read them; I understand them. Therefore, I commit myself and my group, as well as any caterer who may be hired, to follow them.

Signed:   
Responsible Person on Site

Date:



### OFFICE USE ONLY

Rooms Assigned:

Approved: