

## Application for use of Saint Rose of Lima Parish Facilities

1. Facility applying for:  Parish Hall  Class Room

2. Person applying for facilities use:  Parishioner  Non-Profit  Other

3. Name of Sponsoring Organization or Individual

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

4. Date of Event \_\_\_\_\_ Time of Event: \_\_\_\_\_

5. Type of Event: (*Example: Wedding, Dance, Meeting, etc.*)

Please specify \_\_\_\_\_

Is Food being served \_\_\_\_\_ By whom \_\_\_\_\_

Is Liquor being served \_\_\_\_\_ By whom \_\_\_\_\_

6. Who will be attending the event:  Private  Public

Approximate Number of Participants: \_\_\_\_\_

**\$100.00 minimum Insurance fee - Non-refundable for liability insurance, must be paid (at the Diocese of Pensacola -Tallahassee) a minimum of two (2) weeks prior to an event.**