

St. Bartholomew the Apostle Catholic Church

5356 11th Street, Katy, Texas 77493

Phone (281) 391-4758 ❖ Fax (281) 391-3978

Facility Request Form for Single Event - Ministry

A request to use any facility must be submitted to the Facility Coordinator no later than three weeks (21 days) prior to the date on which that facility is needed to avoid conflict with other scheduled events or groups.

The facilities: Church Chapel Old Parish Hall T-Shack (T15 & T16)
 Religious Education Center FLC Hall Table in Narthex Table outside of church Youth Building
 FLC Auditorium FLC Conference Room

Date of Event: _____ Size of Group: _____

Space Requested: _____ Parish Sponsored: _____ Non-Parish sponsored: _____

Group/Organization: _____ Purpose: _____

Contact Person: _____ Phone #: _____

E-mail: _____

“Point Person” for clean-up _____ Tel. # _____

Hours requested from _____ to _____ Set-up Date/Time _____

Equipment Requested (Equipment or items brought into the facility must have prior approval of the Facilities Coordinator.)

VCR/DVD/TV _____ Overhead Projector _____ Screen _____
Sound System _____ Microphone _____ Other * _____

***Note:** Any equipment/items brought in will need prior approval by Facilities Coordinator.

Bulletin Announcement, Sound, Projector, etc. Set-Up: **Contact Pam Felcman at pam@st-bart.org**
Table at Narthex contact Maggie Lopez at maggie@st-bart.org.

Please initial items directly below, sign, and return to the Facilities Coordinator @ SBTACC

_____ I have read and fully understand the SBTACC Facilities Use, Policies, and Procedures document and agree to abide by all requirements therein. All the information provided is true.

_____ Certificate of Liquor Liability Insurance Policy provided.

_____ Certificate of Insurance-Either thru SBTA _____ or: own insurance _____

_____ \$250.00 Refundable Security Deposit Submitted (For property/equipment damage or theft)

_____ Rental payment of: \$_____ (Check # _____ Payable to St. Bartholomew the Apostle)

I shall be responsible for any damage sustained to St. Bartholomew the Apostle Parish property or premises, or accident or injury to persons associated with our activity during the time of use stated above. I release and hold harmless St. Bartholomew the Apostle Catholic Church, The Roman Catholic Archdiocese of Galveston-Houston, their agents, employees, and volunteers from all liability and waive any claim resulting from this activity against them.

Event Organizer Signature

SBTACC Facilities Coordinator Signature

Date

Cancellation notice of 48 hours is required, or security deposit will be forfeited.

Se requiere un aviso de cancelación de 48 horas o se perderá el depósito de seguridad.

For Office Use Only: Date Rec'd: _____ Date Schd: _____
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