

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 _____