



**Santa Sophia Church**  
 9800 San Juan Street, Spring Valley, CA 91977  
 Phone: 619-463-6629 ~ Fax: 619-463-8101 1/2014

**Facility Reservation Request ~ One Day Event/Activity**

**Requestor Information:** Today's Date \_\_\_\_\_  
 Organization: Academy \_\_\_\_\_ Preschool \_\_\_\_\_ CMO \_\_\_\_\_ Parish Organization \_\_\_\_\_ Other \_\_\_\_\_

Group Name \_\_\_\_\_ Contact's Day Time Phone # \_\_\_\_\_  
 Contact or Chair Person \_\_\_\_\_  
 Contact's Cell # \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Room, Date & Time Requested:** (Include your set-up & cleanup times when requesting room)

\_\_\_ Prendergast Hall    \_\_\_ DeMoor Room    \_\_\_ Daniels Room    \_\_\_ Verhoeven Room  
 \_\_\_ Kitchen    \_\_\_ Academy Library    \_\_\_ Resource 1    \_\_\_ Resource 2

<b>Date (1st Choice)</b> _____	Set-up Time Start:	Event Time Start:	Time Event Over:	Clean-up Time Over:
<b>Date (2nd choice)</b> _____	Comments: _____			

Estimated Total Attendance: \_\_\_\_\_ # of Adults: \_\_\_\_\_ # of Youth: \_\_\_\_\_

**Classification Information:** Name of Event: \_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Event open to public: Yes: \_\_\_ No: \_\_\_ Comments: \_\_\_\_\_

Fundraising event: Yes: \_\_\_ No: \_\_\_ Caterer to be used? Yes: \_\_\_ No: \_\_\_ Name: \_\_\_\_\_

Will food be served: Yes: \_\_\_ No: \_\_\_ Type: \_\_\_\_\_

Will alcohol be served: Yes: \_\_\_ No: \_\_\_ Type: \_\_\_\_\_ Liquor License Needed: \_\_\_\_\_

Who will clean up: Volunteers: \_\_\_\_\_ Parish Staff: \_\_\_\_\_ Name: \_\_\_\_\_

Equipment needed: \_\_\_ Microphone \_\_\_ Lapel or \_\_\_ Hand Held \_\_\_ Podium \_\_\_ Other \_\_\_\_\_

**(Please turn in a separate "Room Set-up" to Jim Kinney 3 business days prior to this event.)**

**NOTE: Bookings may not be requested more than twelve months in advance of event date. Every effort is made to accommodate all requests for use of the facilities. Santa Sophia Parish reserves the right to decline or to reschedule events for any reason.**

**Parish Office Use Only:**

*Date Received:* \_\_\_\_\_ *Event Date Confirmed:* \_\_\_\_\_ *Alternate Date(s) Available:* \_\_\_\_\_ *Date Confirmation Sent:* \_\_\_\_\_

Fee to be charged: Yes \_\_\_ No \_\_\_ Amount of Fee: \$ \_\_\_\_\_ To be paid: \_\_\_\_\_

Comments: \_\_\_\_\_ (1/2014)