Our Lady of Peace Church and Shrine
2800 Mission College Blvd.
Santa Clara, CA 95054
Tel: 408-988-4585 Fax: 408-988-0679
www.olop-shrine.org

Facilities Reservation Form

Requestor Information

Parishioner ☐Yes ☐ No   Today's Date:_____

Requester's Name _____

Address _____

E-Mail_(required)_____Phone(H)_____(C)_____

Ministry or Group Name:_____
Requestors from outside the parish will need to complete additional Diocesan forms

Event Information

Event _____Number of people_____
☐Dinner ☐Serving Wine or Beer ☐Serving other liquor (liquor license required if sold)
☐Youth (17 and under) participating or present without their own parents supervision

Requested Date and Time

Requested Date(s)_____

☐One-time use: Start Time _____☐AM☐PM End Time _____☐AM☐PM (include set-up / clean-up time)

☐Weekly: Day of the week:_____ Start Date:_____End Date:_____
     Start Time _____☐AM☐PM End Time _____☐AM☐PM (include set-up and clean-up time)

☐Monthly: Day of the month: _____ Start Date:_____End Date:_____
     Start Time _____☐AM☐PM End Time _____☐AM☐PM (include set-up and clean-up time)

Facility and Resources Requested

Family Learning Center ☐Room(s)_____ ☐ Gym (☐Tables_____☐Chairs_____)
     ☐Kitchen ☐ Projector in Gym ☐Audio System in Gym ☐Stage ☐Portable PA System

☐Church Hall
     ☐Tables _____   ☐Chairs _____

☐Rectory   Room(s)_____

☐Shrine
     ☐Portable Altar ☐PA System ☐Chairs_____ ☐Stage
☐Other _____

Donation

Please help defray the parish's expenses for utilities, cleaning, maintenance, and event support. Suggested donations are:
Gym- $150/hr;   Kitchen- $50/hr;   Classroom- $50/hr;   Church Hall- $50/hr;   Shrine- $50/hr

Donation Amount:_____

Agreement

I agree to the following:
- The Parish reserves the right to reschedule or cancel events due to changing parish priorities
- The Requestor is responsible for set-up, tear-down, and clean-up unless otherwise arranged
- The Requestor is responsible for any missing or broken equipment
- The Requestor will notify the Parish immediately if event is cancelled

Requestor's Signature (non-transferable)_____

Office Use Only

Approved By Pastor:_____

Approved by Facilities Manager: (Joe Mastroieni) _____

Date of Computer Entry_____ by _____
Date Reserving Party Notified _____by _____

Notes:

For outside users:
☐TULIP form filled
☐TULIP form mailed by _____Date_____
☐Diocesan Outside User Agreement filled
☐Outside User Agreement mailed by _____Date_____