

# FACILITY SCHEDULER

**St. Mary Parish**

5589 Dewey Drive  
Stevens Point, WI 54482  
715-344-2599  
parish@toruncatholic.org

**St. Adalbert Parish & School**

3314 St. Adalbert Road  
Rosholt, WI 54473  
715-677-4519  
parish@rosholtcatholic.org

Today's Date: \_\_\_\_\_

Submitted on behalf of: \_\_\_\_\_

For the purpose of: \_\_\_\_\_

Requestor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Yes  No -- I would like a copy of this form to be returned to me.

**Please indicate all areas that you need reserved:**

(Church Proper, Church Vestibule, Church Basement Hall, Church Kitchen, Church Yard, School, School Yard)

Location: \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

Location: \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

Location: \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

Location: \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

Location: \_\_\_\_\_ Date(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

**Upon approval a copy will be returned to requestor with any other necessary information and paperwork.**

Office use:

Notes:

Date received: \_\_\_\_\_ Entered on Calendar: \_\_\_\_\_

Copy to contact (if requested): \_\_\_\_\_