## SAINT ANTHONY CATHOLIC CHURCH 404 N. BALLARD AVE. Wylie, TX 75098-4400 972-442-2765 FAX 972-429-9215

## **Scheduling Request Form**

Please fill out this form with your request for use of facilities during the coming year. It is important that you fill out this information exactly.

<u>Date:                                    </u>	Organization Name:
	Coordinator Name:
Contact Person	
Address:	
City/State:	Zip Code:
Phone; ()	·
Fax: ()	
E-mail:	
What facility do you wish to use?	
Second choice?	*** ** * * * * * * * * * * * * * * * *
What will facility be used for?	
How many people do you plan on at	tending?
If using Father Pondant Hall will you	be using the Video/Sound System?
What dates do you require?	
FROM: //	
TO: / /	
What time do you need?	
Beginning:	(AM) (PM)
Ending:	<del></del>
What frequency? (daily, weekdays, 2	2 <sup>nd</sup> Tuesday, monthly, etc.)
NOTE: Please return this to the office	ce as soon as possible.
You will be informed if there are any	changes to the schedule you requested.
If you have something booked and I of time.	Father needs to use the facility for church purposes you will be notified ahead
If there are any changes to this requ	est, please contact the office as soon as possible so we can make the

changes.