St. John Nepomucene Catholic Church Facilities Use Request – Parish Group

Contact Name: Phone: E-mail: Date(s) requested: Time requested: Location requested: Frequency: Once Weekly Monthly Other Group size: Number of tables needed: Round Rectangular Number of chairs: Other equipment: Lectern TV VCR DVD Outputer hookup Projector Audio Marker boar Will children be present? Yes No How many? If children are present, do you have enough people who are Safe Environment cleared? What are the names of your Safe Environment cleared people?	Contact Name: Phone: E-mail: Date(s) requested: Time requested: Location requested: Frequency: Once Weekly Monthly Other	E4-							
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