



# MOST HOLY TRINITY PARISH

212 Route 390 • Cresco, Pa. 18326

P: 570-595-3100 Fax: 570-595-3200

www.mht-poconos.org • mht-poconos@outlook.com

## Facility Use Request

### Event Date and Time

Dated Requested: \_\_\_\_\_

Start time of Event: \_\_\_\_\_ End time of Event: \_\_\_\_\_

Repeating Event? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Event Description

Name of Event: \_\_\_\_\_

*It should reflect what would appear on the parish calendar and/or bulletin, if applicable.*

Purpose of Event:  Faith Formation  Fundraiser  General Meeting  
 Prayer/Liturgy  Social Gathering  
 Other: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Are you a MHT Parishioner? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are Attendees MHT Parishioners? \_\_\_\_\_ All \_\_\_\_\_ None \_\_\_\_\_ Mixed

Children/Youth in Attendance? \_\_\_\_\_ Yes \_\_\_\_\_ No (anyone under 18)

### Your Contact Information

Your Name: \_\_\_\_\_

Organization: \_\_\_\_\_

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

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

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### For Office Use:

Pastor's Approval: \_\_\_\_\_ Approval Date: \_\_\_\_\_

Liability Forms: \_\_\_\_\_ Yes \_\_\_\_\_ No if yes, forms received on: \_\_\_\_\_