

St Joseph's, Tollcross

Application Form for use of the Parish Hall

Name of Applicant

Title: _____ First Name: _____ Surname: _____

Address of Applicant: _____

Telephone Numbers: Home: _____ Mobile: _____

(E-mail: _____)

Regarding your use of the Parish hall

Date required: ___/___/_____ Time required: _____ to _____

Nature and purpose of event:

Details of numbers expected: Adults: _____ Children: _____

Catering required? YES/ NO (Delete as appropriate)

Please use this space to provide other information which you think may help us when considering your application:

Please note that the person making the application is responsible for ensuring that all Parish Hall Booking Conditions are adhered to. All damages must be paid for.

Are you a parishioner?: YES/ NO (Delete as appropriate)

Signature of Applicant: _____ Date: ___/___/_____

FOR COMMITTEE USE ONLY

Fee Due: _____ Deposit Paid: _____ Account Paid: _____