

2016.2017 Calendar Change Request Form

ST. JAMES THE APOSTLE PARISH | 480 S. PARK BLVD | GLEN ELLYN, IL 60137

FOR OFFICE USE ONLY:

DATE COMPLETED _____ BY _____

This form is used to notify the parish office of events that are currently scheduled on the parish calendar, but require a change of date, time, facility, setup, etc. OR need to be cancelled. All changes must first be approved by the office before implementation.

Organization: _____ Event Name: _____

Original Date(s) Requested for Event: _____

Original Facility: _____

Original Start Time: _____ AM PM

Original End Time: _____ AM PM

Please Indicate All Changes Needed:

- | | |
|--|--|
| <input type="checkbox"/> Cancel the Event | <input type="checkbox"/> Cancel the Keyword on Calendar Heading |
| <input type="checkbox"/> Change Date(s) to: _____ | |
| <input type="checkbox"/> Change Start Time to: _____ | |
| <input type="checkbox"/> Change End Time to: _____ | |
| <input type="checkbox"/> Change Time Required for Setup to: _____ | |
| <input type="checkbox"/> Change Time Required for Cleanup to: _____ | |
| <input type="checkbox"/> Change Facility to: _____ | |
| <input type="checkbox"/> Change Event Name to: _____ | |
| <input type="checkbox"/> Change Organization to: _____ | |
| <input type="checkbox"/> Other Changes Needed: _____ | |

☐ Change **Setup** for: ☐ St. James Hall 1 (holds 20+ people) ☐ St. James Hall 2 and/or 3 (holds up to 20 in each room)

☐ Church Narthex ☐ Other (specify): _____

Number needed of:

☐ Round Tables: _____ (seat 8 people each—we have a total of 16)

☐ Rectangular Tables: _____ (8' x 30": seat 8 people each—we have a total of 23)

☐ Rectangular Tables: _____ (6' x 18": seat 3 people each—we have a total of 8)

☐ Chairs: _____ (we have a total inventory of 342; 257 (SJH1); 73 (SJH2/3); 12 mismatched)

☐ White Fundraising Table: _____ ☐ Highboy Tables: _____ (24" round—we have a total of 10)

Additional items needed:

___ Room Key* ___ Podium ___ Microphone ___ TV/DVD ___ Easel (including in Narthex)

___ Projector* ___ Room Dividers ___ Coffeepots/Kitchen Items** Other: _____

* Sign Out at Ministry Center/Return next day

**Refer to 2015-2016 Kitchen Guidelines

**Please Indicate Setup
Changes on Reverse »**

Name: _____

E-mail: _____

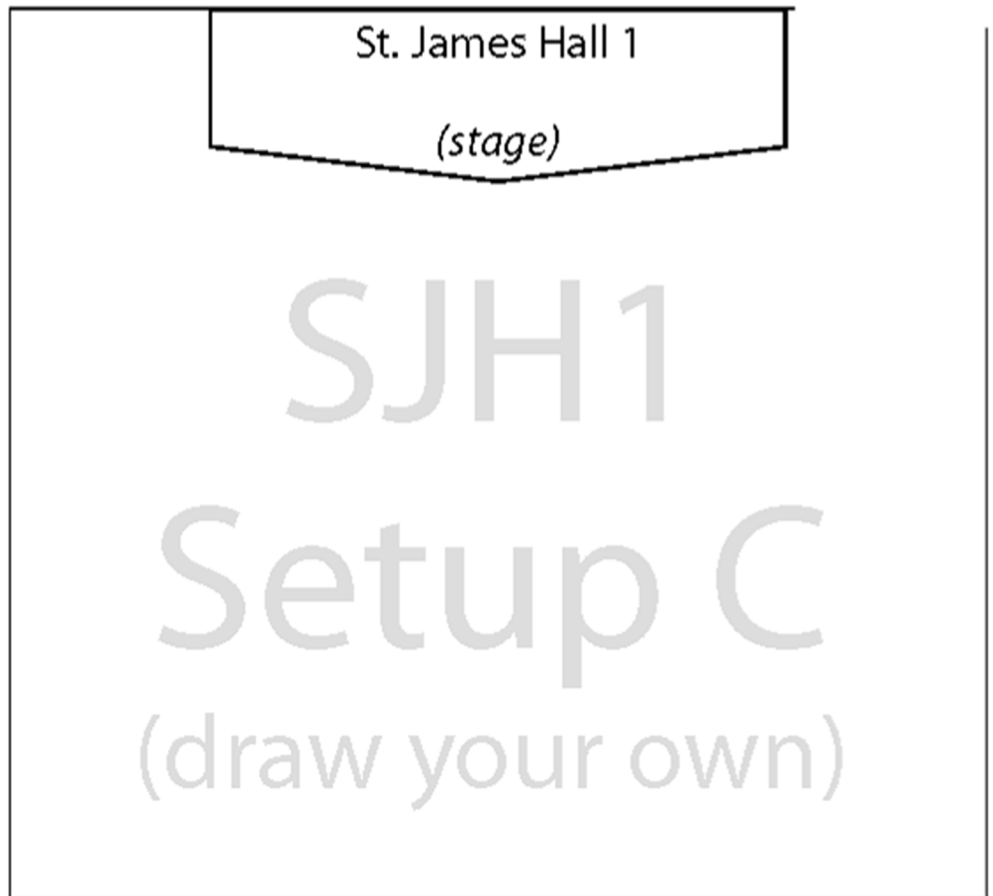
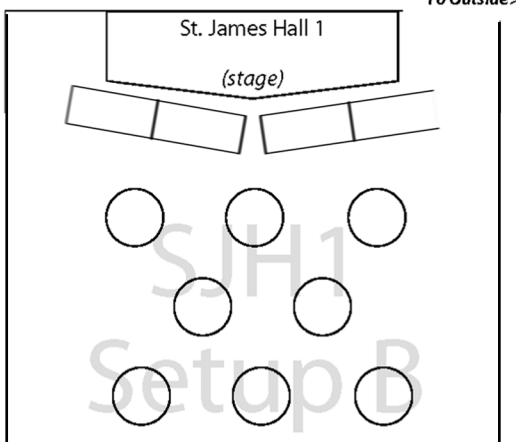
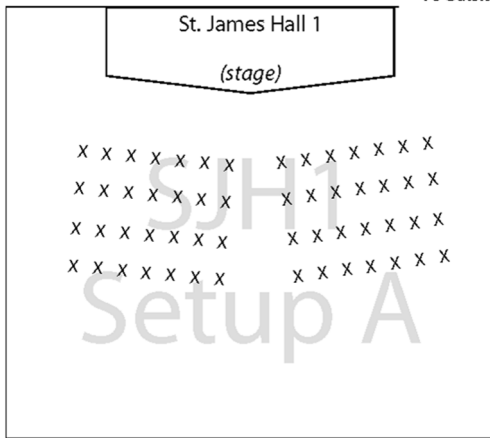
Daytime Phone: _____

Setups for St. James Hall 1 (Circle One):

A | Theatre

B | Hospitality

C | Draw Your Own



Setups for St. James Hall 2/3 (Circle One):

A | Undivided

B | Divided

C | Draw Your Own

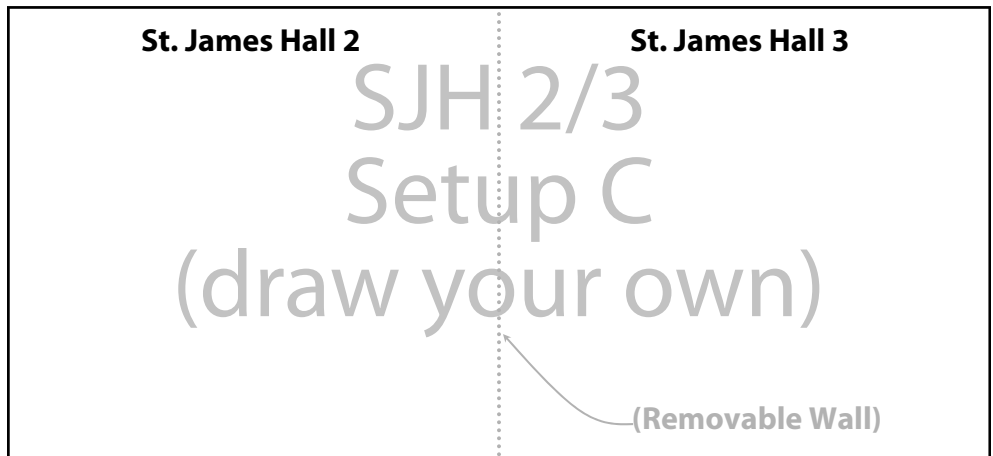
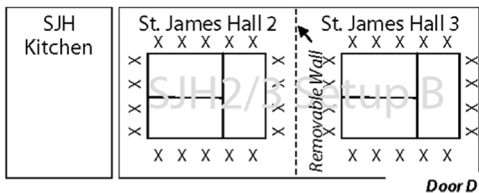
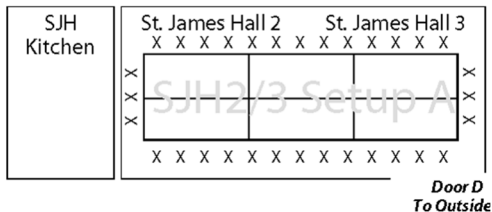
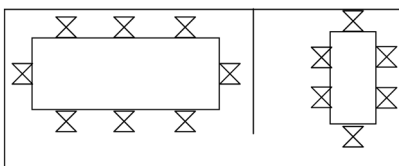


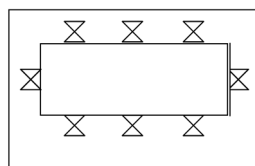
Diagram of Ministry Center Rooms:

Permanent setups, but chairs may be moved within the room



Dining Room/Kitchen

2 TABLES, 14 CHAIRS, TV/DVD
ACCESS TO SERVE COFFEE/FOOD
(4 FOLDING CHAIRS AVAILABLE)



Main Level Conference Rm.

1 TABLE, 8 CHAIRS, TV/DVD
(2 EXTRA CHAIRS AVAILABLE)