

Event Petition Approval Form
St. Mary Catholic Church and School



Request Date _____
Proposed Location (Please check all which are applicable):

- _____ Marian Chapel (130 Maximum)
- _____ Main Church (900 Maximum)
- _____ Narthex
- _____ Parish Hall (250 Maximum)
- _____ Parish Office (40 Maximum)

Name of Ministry Organizing Event: _____

Ministry Event Coordinator _____

Contact Information

Cell: _____

Email: _____

Event Info

Proposed Event Date _____

Proposed Time Frame (Start and end times) _____

Event Purpose (choose one)

- ◇ Fundraiser
- ◇ Social
- ◇ Retreat
- ◇ Spiritual Enrichment
- ◇ Outreach
- ◇ Service

Event Description (Name, Target Audience, Etc.):

How does this event contribute to the mission, vision and values of St. Mary Catholic Church and School?

Total Proposed cost of the event (Please attach detail cost) :

Proposed funding for the event (i.e. ticket sales, donations, sponsor, etc):

Ticket Price: _____

Date Ticket Sales Begin: _____

Expected number of Participants: _____

Will Minors be Involved : Yes No

Ministry Leader Signature: _____

Ministry Event Coordinator Signature: _____

Function approved by Pastor: _____ Date: _____

Seal: