

**Holy Angels Parish**  
South Meriden, Connecticut

**Rev. Roland M. LaPlante Gymnasium Rental Application**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Day of Week Desired: \_\_\_\_\_ Date Desired: \_\_\_\_\_

Start Time: \_\_\_\_\_ AM/PM Concluding Time: \_\_\_\_\_ AM/PM

Purpose of Activity: \_\_\_\_\_

Approximate Number in Attendance: \_\_\_\_\_

Number of Tables Needed: \_\_\_\_\_ Number of Chairs Needed: \_\_\_\_\_

Will You Be Using A Caterer? \_\_\_\_\_ Will Alcoholic Beverages Be Served? \_\_\_\_\_

If Yes, Caterer's Name and Phone Number: \_\_\_\_\_  
\_\_\_\_\_

-----  
In consideration of and agreement to the Center Use Program Policy and Procedure and the above contributions pledged, Holy Angels Church offers the use of its gymnasium in the Center to:

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

Address: \_\_\_\_\_

Date and Time: \_\_\_\_\_

The occupant hereby certifies that he/she has read the Center Use Program Policy and Procedure brochure and accepts the stated policy and procedure.

Agreed for the Church:

Agreed for the Occupant:

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Church Use Only**

Deposit Received \_\_\_\_\_ Balance Received \_\_\_\_\_ Insurance Coverage Received \_\_\_\_\_