

**DIOCESE OF WINONA PARISH/CATHOLIC SCHOOL  
APPLICATION FOR FACILITY USAGE**

**TO AVOID DELAY OR DENIAL OF FACILITY USAGE, PLEASE ENSURE THAT  
EVERY FIELD IS COMPLETED**

**Name of Parish or Entity:**  
\_\_\_\_\_  
\_\_\_\_\_  
Street (Physical) Address (No PO Boxes):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City/State: \_\_\_\_\_  
\_\_\_\_\_  
ZIP Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

**Date of Event:**  
\_\_\_\_\_

**Type of Event:** (Be specific. Example: wedding reception, anniv. Party, etc):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Time of Event:**  
From: \_\_\_\_\_ To: \_\_\_\_\_

Approximate Number of Participants:  
\_\_\_\_\_

Requested space to be utilized:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Sponsoring Individual or Organization:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contact Information:**  
Name: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Street Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City/State: \_\_\_\_\_  
\_\_\_\_\_  
ZIP Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
\_\_\_\_\_  
Request for approval notification via e-mail, please print address:  
\_\_\_\_\_  
\_\_\_\_\_

**How does this event relate to the teachings/traditions, outreach, evangelization and or mission of the Catholic Church?**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parish/School OFFICE USE ONLY:**

Received	Approved/Denied: _____
By: _____	By: _____
Date: _____	Date: _____