

Holy Spirit Event Set-Up Requisition

Sponsoring Organization: _____ Event Title: _____

Contact Person: _____ cell phone: _____ Email: _____

Facility Space Requested: _____

Day/Date: _____ Start Time: _____ End Time: _____

Person responsible for closing up at end of event: _____ cell: _____ Email: _____

Accessories required and quantity:

_____ folding chairs _____ other chairs (specify) _____

_____ long tables _____ round tables _____ podium _____ large trash cans

_____ video projector _____ screen _____ TV _____ microphones

_____ podium _____ microphones _____ extension cords

Additional requests: _____

In space below, please sketch a spatial layout using benchmarks within the room for set up.

Please return this form to Larry Quinn, Facilities Manager, 10 days prior to the event by sending a scan to lquinn@holyspiritflames.org, sending a fax to 703-978-7438, or mailing to 5121 Woodland Way, Annandale, VA 22003. Questions? 703-978-7117 ext 1115