

Trinity Cathedral Scheduling Request

Date of Meeting: _____ Day of Meeting: _____

Date Making Request: _____

Arrival Time: _____ Departure Time: _____

Group Meeting: _____

Room Requested: _____ (Morrison Hall, gym, Conference Room, etc.)

Number Attending Meeting: _____

Nursery Needed: _____ Time: _____

Contact Name & Signature: _____

Contact Person Email: _____

Contact Person Phone: _____

Please submit requests to Mary Hodges in the church office at mhodes@trinitylittlerock.org or a hard copy may be submitted in the church office at the front desk at least two weeks before the event.

Church Phone: 501-372-0294

Church Fax: 501-372-0416

All pages must be completed. Alcohol policy is included.

For Office Use Only

Conflicts: _____ Posted on Office Calendar- Date: _____

Approved by: _____

Sexton Scheduled on Duty: _____

Sexton Notified on Date: _____