



Application for the use of Saint Francis Xavier Parish Facilities
SFX Property Management Office (PMO)
 428 Great Northern Way, Vancouver, BC V5T 4S5
 Tel: 604.254.2714, ext 103 Fax: 604.254.2514

1. Applicant (Please PRINT): _____ (Personal ID may be required)

Address: _____ City _____ Postal Code _____

Telephone: _____ Cell: _____ Email: _____

2. The applicant is authorized to apply on behalf of the following Organization/Group/Society:

_____ (Name, please PRINT)

Address: _____ City _____ Postal Code _____

Telephone: _____ Cell: _____ Email: _____

3. Meeting Frequency: _____ (One time only, Bi-weekly, Weekly or Monthly, Please specify)

4. Date required: _____ **Time : FROM** ____ am/pm **TO** ____ am/pm

5. Nature of activity _____ **Est. # of participants:** _____

	<u>Facilities</u>	<u>Please √ if required</u>	<u>User Fee</u> (for PMO use only)
School bldg:	a. SFX Gymnasium	_____	_____
	b. Kitchen (NO Cooking facility)	_____	_____
	c. John Paul II Room (2/f)	_____	_____
	d. Other rooms (specify) _____	_____	_____
Church Bldg:	e. Parish Hall	_____	_____
	h. Divine Mercy Room	_____	_____
	i. St. Joseph Room	_____	_____
	j. Our Lady of China Room	_____	_____
	k. Other rooms (specify) _____	_____	_____
Parking:	l. Upper level parking	_____	_____
	m. Lower level parking	_____	_____
Total User Fee:			\$ _____
Plus Damage deposit:		\$500.00	

** Applicants are reminded that if the facilities are left with trash, untidy or failing to restore the facilities to the condition in which they were found prior to uses, a note will be added to your group/sodality file. The Property Management Office may refuse to let you use any facilities again if 2 notes are accumulated within two (2) months. Alternatively, the Parish would gladly do the above for you by hiring a janitor at cost of \$60 per hour, minimum 2 hours.

1. The undersigned, representing the Organization/Group/Society, have read and agreed on the rules on the use of the facilities. Parish's sponsor programs are subject to review & approve annually.

Signature of Applicant

Date

*** Please return completed form to the Parish Life Center OR email to: sfxbooking428@gmail.com

2. FOR SFX PROPERTY MANAGEMENT OFFICE USE ONLY

	<u>Date</u>	<u>By</u>
Applicant informed of acceptance/reject	_____	_____
Fees (\$ _____) and Damaged deposit (\$ _____) received	_____	_____
Damage deposit (\$ _____) returned	_____	_____

Remarks: