



ST. CLARE OF ASSISI
In/Out Request Form 2022-2023

Date submitted: ____//____//____

In/Out Requests:

- Submit requests to the office 2 WEEKS PRIOR.
- All requests require review & approval.
- Questions – Stephanie Bews (623) 975-5616 or sbews@stcpaz.org

(PLEASE PRINT)

Explain Request: _____

List of Items In/Out: _____

Where Will Items Be Placed: _____

(Draw diagram on the back if necessary)

Date In or Out: ____//____//____

Date In or Out: ____//____//____

Other Attachments (if applicable):

- Event/Fundraiser Request Form
- Facility Request Form
- Maintenance Request Form
- Bulletin Article Request Form
- Altar Announcement Request Form

Submitted by: _____

E-mail: _____

Phone Number: _____

----- **Office Use Only** -----

APPROVED or DENIED (circle one)

Date of Decision: ____//____//____

Decided by: _____

Date of Completion: ____//____//____

Confirmed by: _____