



Miriam Terlinchamp, Senior Rabbi
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TEMPLE SHOLOM EVENT REQUEST

REQUESTED DATE OF EVENT: _____ **REQUESTED TIME:** _____

EVENT TITLE: _____

EVENT LEADER(S): _____

EMAIL: _____ **PRIMARY PHONE:** _____

EVENT DESCRIPTION FOR PUBLICITY:

EXPECTED ATTENDEE #: _____

SET UP NEEDS:

- Sanctuary
- Boardroom
- Kitchen/Foyer
- Classroom

ADDITIONAL SET UP NEEDS (ex: tables, tech assistance, staff or security presence, etc):

FOOD SET UP NEEDS:

- Event is catered or potluck
- Cold Drinks need to be stored
- Coffee, Tea, and Condiments need to be set up prior to event

No event can be placed on the calendar until this form and any requisite deposit is received.

Administrator

Event Leader