

**St. Joseph's Church  
Charlton, MA**

***Space / Location  
Reservation***

**Today's Date:** \_\_\_\_\_  
**Name of Group/ Organization** \_\_\_\_\_  
**Date of Activity:** \_\_\_\_\_  
**Location of Activity:** \_\_\_\_\_  
**Time of activity including set up and clean up** \_\_\_\_\_  
**Contact Person with Phone #:** \_\_\_\_\_  
**Complete Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Describe the Activity:** \_\_\_\_\_  
**How many people are expected to attend:** \_\_\_\_\_  
**Will you be using the Church tables and chairs?** \_\_\_\_\_  
**Location of activity** \_\_\_\_\_

Please mail this request to:

**St. Joseph's Church, P.O. Box 338, Charlton City, MA 01508**

You will be notified by mail if this date and activity has been approved. Thank you!

Signature of Approval: \_\_\_\_\_

Reverend Robert Grattaroti      Date