

Request for Calendar Event

(This form is for request only. Your activity is not approved until you receive a call back from the office.)

I agree to use the facilities only for purposes that are consistent with the ministry's faith and beliefs.

Date of Event: _____ Event Title: _____

Circle Group: Class Department Other Ministry

Specify Group: _____ Departmental Director: _____

Set-Up & Decoration Time: Start _____ Stop _____

Time of Event: Start _____ Stop _____

Clean-Up Time: Start _____ Stop _____

Person Coordinating the Facilities for the Event: _____

Address: _____ Phone: _____

Specific Room(s) Requested: _____ How Many Expected: _____

Flyer Needed? _____ (See Flyer Request Sheet) Promote in Bulletin? _____

Number of Chairs Needed: _____ Number of Tables Needed: _____

Other Equipment Requested: _____

Where Will the Event be Held if NOT Church Facility? _____

Will Bus Be Needed: Yes _____ No _____ How Many? _____

Note: Contact Bus Director to coordinate drivers. Bus kids must show bus driver permission slip.

State Purpose of the Event: _____

How Are You Going to Get Lost People to Attend This Event? _____

How Will You Record Prospects When They Attend? _____

How Do You Plan to Give the Gospel? _____

How Do You Plan to Get Them to Attend Sunday School? _____

This Information Was Provided By: _____ Date: _____

For Office Use

Event Approved By: _____ Date: _____

Entered in Church Calendar By: _____ Date: _____

Event Coordinator Notified By: _____ Date: _____

Copy Sent to:

Custodial Staff _____ Date: _____

Bus Director _____ Date: _____

Assigned Staff _____ Date: _____