

Request for Calendar Event

(This form is for request only. The office will let you know if it is unavailable.)

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: _____

Phone: _____

Specific Room(s) Requested: _____ How many expected: _____

Flyer needed? _____ (See Flyer Request Sheet) Promote in bulletin? _____

of Chairs needed: _____ # 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: Bus kids must show bus driver permission slip.

Who is giving the devotion/message? _____

Names of childcare workers(if applicable): _____

This information was provided by: _____ Date: _____

For Office Use Only

Event Approved By: _____ Date: _____

Entered in Church Calendar By: _____ Date: _____

Copy Sent to:

Custodial Staff _____ Date: _____

Bus Director _____ Date: _____

Assigned Staff _____ Date: _____

Additional _____ Date: _____