

Event Scheduling Form

Today's Date: _____

You will be contacted the Monday *after* you turn in this form regarding approval of your event.
Certain fees may be required for *non-church* events. Please refer to our Fee Policy for more info.

Submitted by: _____

Church Event? ☐ yes ☐ no

Person in Charge: _____

Phone: _____

Email: _____

Event Type:

Name of Event: _____

☐ Church and Community

Event Date: _____

☐ Children

Day of Week: _____

☐ Committee Meeting

Beginning Time: _____

☐ Mission

Ending Time: _____

☐ Young Adult

Door Opening Time: _____

☐ Youth

Door Closing Time: _____

Location Requested: _____

Number Expected: _____

If off campus, where: _____

Personnel Needs:

Childcare* ☐ yes ☐ no

Sound Technician** ☐ yes ☐ no

Number of Children: _____

Interpreter for Deaf ☐ yes ☐ no

*Childcare is provided for children **3 years or younger** unless approved by Children's Minister. Childcare will **not** be provided beyond **9 pm** on any night.

There will be a fee for **non-church events requiring a sound technician.

Audio Visual Equipment:

☐ White Board

☐ Laptop

☐ Projector

☐ DVD/TV

☐ Screen

Van Request: ☐ 2015 Van ☐ Cargo Van

Driver Name: _____ (must be listed on insurance)

Food Service: Attach a Food Service Request Form

Special Instructions: **Room setup** and **sound needs** (number of microphones, if instruments will be used, etc.)

FOR OFFICE USE ONLY

Communication Plan (fill in date to be published)

☐ Life of the Church _____

☐ Press Release _____

☐ First Notes _____

☐ Website _____

☐ Poster _____

☐ Events

☐ Facebook _____

☐ Rotator

☐ Twitter _____

☐ Stand Alone Page

☐ Program _____

☐ Approved

☐ Not Approved

Church _____

Pastors _____

Personal _____

Website _____

Communication _____