

CALENDARING OF EVENTS REQUEST

New Event _____ Cancellation _____ Change _____

GENERAL INFORMATION			
Event To Be Placed On Calendar _____ (As it is to appear in print)			
Date of Event _____	Location/ Room No. _____ (Annex Conf/MPR/Sanctuary/ FH/FE1 or FE2)	Time : _____ Early Set-Up Time (Specify) Break-Down _____	Start _____ End _____
<i>*FH=Fellowship Hall *FE=Front Extension</i>			
Is this a reoccurring event? Y/N _____ How Often/Date Range _____			
Number of People To Attend _____			
Requests Forthcoming :			
<input type="checkbox"/> Set-Up <input type="checkbox"/> Sound / Ligh Sound / Lighting			
<input type="checkbox"/> Food Service <input type="checkbox"/> _____			
<input type="checkbox"/> Audio / Visual <input type="checkbox"/> _____			
Additional Comments _____			
Person Making Request _____ Phone No. _____ Date _____			
(Signature)			
(Email Address)			
Ministry/Department _____ Position _____			
FOR OFFICE USE ONLY			
<input type="checkbox"/> Approved and Scheduled <input type="checkbox"/> Not Approved			
Reason(s) For Decision _____			
Approved By _____ Date _____			