EVENT REQUEST FORM

(Requests are scheduled up to a year at a time. A notification will be sent upon confirmation of availability. Requests for use of the Main Kitchen must <u>first</u> be submitted and approved by Jo Gallant, Kitchen Supervisor.)

- **TODAY'S DATE:** _____ **TIME:** _____ **SUBMITTED BY:** _____
- ☐ New Request ☐ Change to existing request ☐ Adding to request ☐ Bulletin Announcement
- **NAME OF EVENT:** _____
- **IF CHANGE TO EXISTING, INDICATE INITIAL SCHEDULED DATE AND TIME:** _____
- **START & END DATE(S):** _____ to _____
- **START & END TIME(S):** _____ to _____
- **RECURRING EVENT?** (*Check One*): ☐ Weekly ☐ Bi-Weekly ☐ Monthly **DAY OF WEEK:**_____
- **LOCATION:** _____ **LOCATION (**2nd choice**):** _____
- **NUMBER OF PARTICIPANTS:** _____ **CHURCH GROUP** (*circle one*)**:** Yes or No
- **CONTACT PERSON:** _____ **CONTACT PHONE NUMBER:** _____

- **VAN REQUEST** (*check all that apply)***:*** ____ 7-passenger ____ 12- passenger

- **BULLETIN ANNOUNCEMENTS** **Date(s) for Posting: _____**

*(**Please limit to 3 lines**; Items are accepted until 12 p.m. the Wednesday prior to the Sunday posting)*

_____

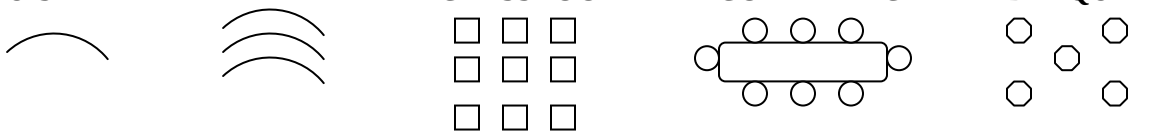
_____

_____

SETUP INSTRUCTIONS/REQUESTS: (***<u>NOTE</u>*****:** *all food requests must be arranged with Kitchen staff*)

- **LAYOUT** (*Please circle one*)**:**

U-STYLE **THEATER** **CLASSROOM** **CONFERENCE** **BANQUET**



- **EQUIPMENT REQUESTS** (*Please indicate quantity*)**:**

____ Microphone	____ DVD player	____ Film Screen
____ Cassette Player	____ Podium	____ Overhead Projector
____ CD player	____ Flip Chart	____ Extension Cords
	____ Film Projector	____ Other

(OFFICE USE ONLY)

Approved by: _____

Date entered: _____

Time entered: _____

<u>Church Office Comments:</u>