

MINISTRY LEADER:

Fill out the "Required Information" box below to begin the activity request form process. Return the completed form to the church office. A support staff member will contact you to complete the activity request form process. Once the activity is approved, you will receive a written confirmation for the activity and the room assignment(s).

REQUIRED INFORMATION

Activity Name: Activity Date:

Start Time: End Time: Expected Attendance:

This activity is for (check all that apply): Adults Youth Children

Your Name: Daytime Phone: Date:

Tell us about your event:

FOR OFFICE USE

Pastoral Approval (Required):

_____ Date _____ Received in office _____ (Date/Time/Initials)

Room Assignment(s): _____