

Event Scheduling Form Millville Church of the Nazarene

Events need to be scheduled at least 30 days in advance

Use this form to request a date to be added to the master calendar for **all activities** that require use of the facility, equipment, or the property including weekly classes and ongoing events.

Turn form into your Administrative Leadership Team Member for your ministry team.

Staff will approve your event and the church secretary will assign you a room if needed.

No room changes may be made without the approval of the church secretary.

Ministry Team _____

Date Request Made ___/___/___ Date(s) of event ___/___/___ - ___/___/___

___ Weekly event ___ Monthly event ___ Yearly event ___ One time event

Times facility is needed _____ AM _____ PM

Times of event _____ AM _____ PM

Event Information

Name of Event/Group: _____

Person in Charge: _____ Phone: _____

Purpose of Event: _____

Number of anticipated participants _____ Church Related Activity? ___ YES ___ NO

Location of Event

___ At Church: Room(s) needed: Sanctuary Kitchen Boiler Room Upstairs Kitchen Front Room Nursery
(Circle all that apply) Children's Room Yellow Room Back Yard

___ At Property: Facilities Needed: Tent/Canopy Calhoun's House Fire Pit

(Circle all that apply)

___ Off Campus: Address _____

Phone: _____

Other Teams Needed:

___ Fellowship, ___ Worship, ___ Women's Ministries, ___ Men's Ministries, ___ Children's Ministries,
___ Youth, ___ Relevant, ___ Prayer, ___ Compassionate Ministries, ___ Service

(Team Leaders Initial if you have been contacted and agree to participate)

Need Church Van? ___ YES ___ NO

Need Promo in Bulletin? (Please enclose promo) ___ YES ___ NO

Need Promo in Free Newspaper? (Please enclose info for free paper/cable advertising) ___ YES ___ NO

Need Promo on Powerpoint ___ YES ___ NO

Need material Copied? (Please enclose originals) ___ YES ___ NO

**Please remember to consider clean up and set up crews, sound, sign up sheets, nursery care, all promo
If another ministry team has not signed off on these then you are responsible this for your event!**

OFFICE USE ONLY

Staff Approval: ___ YES ___ Date NO ___ Reason: (circle one)

Form not complete (see highlights) Ministry Teams needed did not initial

Insufficient Information on Event Other (see Staff for info)

Facility not available (see Church Secretary for possible reschedule)