

Oak Grove United Methodist Church Church Calendar Event Request

Name of event to be scheduled _____

Sponsoring Organization or Ministry Area _____

Name of person submitting request: _____ Daytime phone # _____

Staff Contact Person _____ Is staff person attending the event? Yes No

Staff Signature: _____ Date submitted ____/____/____

A. IF SINGLE DAY EVENT

Day / Date requested: ____/____/____/2008 Event time requested: From: _____ am /pm To: _____ am/pm
Skip to Section C. Set Up Time: _____ am/pm Tear Down Time: _____ am/pm

B. IF MULTIPLE DAY EVENT

Beginning day / date requested: ____/____/2008 Last day / date requested: ____/____/2008

Event time request: From: _____ am /pm To: _____ am/pm

Set Up Time: _____ am/pm Tear Down Time: _____ am/pm

Frequency of event: Daily Weekly Monthly

If monthly: same relative day and week _____, other frequency _____

C. SET-UP INSTRUCTIONS

Facility, Area or Room(s) requested: _____

Number of persons expected to attend: _____ Will nursery be needed? Yes No

Will volunteer preparation or decoration time be needed? Yes No If so, when? _____

Number of tables, trashcans, chairs, ect.: _____

(Please draw diagram of room set-up on back if needed.)

D. EQUIPMENT REQUESTS

Audio-visual equipment needed (list): _____

Microphone(s) - Include number and type needed: _____

Podium (include in room diagram) Yes No

Other equipment needed: _____

E. FOOD SERVICE (Note: You are responsible for your own food service arrangements, if using outside caterer.)

Will the event be catered? Yes No By whom? _____

When will the caterer arrive? _____ am/pm. **Please inform caterer ahead of time where they should go to unload.**

Which kitchen will be used? Main Church Kitchen CDC Kitchenette Student Ministry Kitchenette

Please fill out this form completely. A staff signature is required before this request will be scheduled on the Main Church Calendar. If there is a conflict or other scheduling problem, you will be notified promptly. If this event is postponed or cancelled, please notify the church office by phone at 404-636-7558 x217.

FOR STAFF USE ONLY BELOW THIS LINE

Does the building need to be: unlocked by Building Super? Yes No locked by the Building Super? Yes No

Date: _____ Fee Paid: _____ Carl: _____ Moe: _____