



TVPC EVENT NOTIFICATION

Date Submitted: ___/___/___ Submitted by: _____ Phone #: _____

EVENT NAME: _____

EVENT DATE(S): _____

If this is a reoccurring meeting please list the dates or the frequency (i.e.: first Monday of every month)

EVENT BEGINNING TIME: _____ AM or PM ENDING TIME: _____ AM or PM
Circle one *Circle one*

NORTH ATRIUM DOORS UNLOCKED BY: _____ AM or PM LOCKED BY: _____ AM or PM
Circle one *Circle one*

Note: Doors are normally unlocked 15 minutes before and locked 20 minutes after event unless noted.

FRONT DOOR UNLOCKED: YES or NO _____ AM or PM LOCKED BY: _____ AM or PM
Circle one *Circle one* *Circle one*

EVENT LOCATION: _____ Village Church _____ Offsite (specify): _____

Reserve the following room(s) _____

Need room(s) _____ minutes before event and _____ minutes after the event.

Estimated number of people _____

SPONSORING GROUP: (NOTE: All events must have prior approval by the Chair of sponsoring group.)

Congregational Life Ministry Spiritual Growth Other: _____
Deacons Missions Worship _____

EVENT DESCRIPTION (briefly describe the event for our online calendar)

Contact Person _____ Phone #: _____ E-mail: _____

Please specify room setup, equipment, furniture on back of this request.

NOTE: *It is your responsibility to leave the place of meeting or activity in a tidy state. Be sure the lights are turned off, the door(s) and windows are closed, and the blinds are closed.*

CHURCH BUS NEEDED: *Circle one* YES or NO Authorized Driver: _____

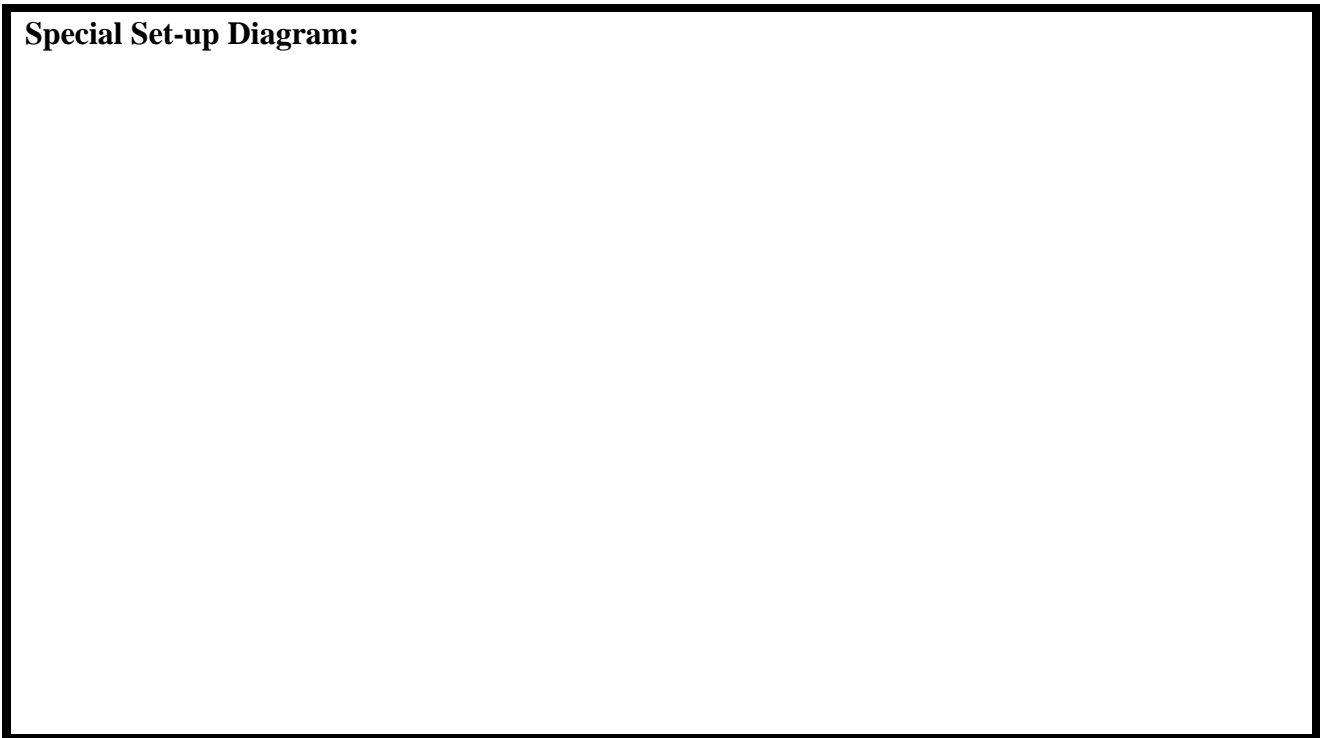
Dates and Times: from _____ _____ AM or PM to _____ _____ AM or PM
date *time* *Circle one* *date* *time* *Circle one*

SIGN-UP: _____ at the Welcome Center
_____ table or sign in the Narthex on _____ date(s) (subject to approval)
_____ by email to or online at _____

COST OF EVENT: _____

If this meeting or event must be cancelled, please notify the Administrative Coordinator as soon as possible.

Special Set-up Diagram:



IF EVENT FALLS ON A WEEKEND, YOU ARE RESPONSIBLE FOR SETTING UP THE ROOM AND RETURNING THE ROOM TO THE ORIGINAL SET UP. ROOM DIAGRAM IS ALWAYS REQUIRED.

RECURRING TYPE OF SET-UP (see book of room layouts in Administration office):

Classroom Standard Luncheon Dinner Reception

Other (Please describe): _____

FURNITURE:

Number of Tables: _____ Round _____ Rectangle (6') _____ Card Number of Chairs: _____

____ Piano ____ Podium ____ Flip Charts ____ Dry Erase Board ____ Easel(s) (approval required)

Other: _____

AUDIO/VISUAL EQUIPMENT:

Please contact the Village Church staff liaison about your needs & expectations even if you are bringing your own equipment.

TV VCR/DVD Screen Overhead projector Projector

Mic(s) _____ Other: _____

Submit this form to the Administrative Coordinator (place in mailbox).