



# Church Event Request Form

Please provide the following information to request scheduling of a special event. All requests will be reviewed by the Staff at their next regularly scheduled meeting. If additional input is needed, the Staff will consult the Elders at their next regularly scheduled meeting.

The Staff is honored to partner with our congregation to provide varied ministry and event opportunities. Our goal is to offer events that fit within the church's mission and vision and meet the needs of our church and community. The Staff works diligently to maintain a clear understanding of the overall church calendar which also helps guide decisions regarding special events. While we hope to be able to fulfill your request, please understand there are many variables that go into the decision.

Please PRINT CLEARLY.

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Contact Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone Number: (\_\_\_\_) \_\_\_\_\_  Home  Cell  Work

Email Address: \_\_\_\_\_

## Event Information

Highland Hills' mission is to help people take their next step in Christ.

We invite people to **Come** (experience God), **Belong** (grow in community), and **Share** (give of yourself).

This event will fit the  Come  Belong  Share portion of the church's vision.

Proposed Name for the Event Idea: \_\_\_\_\_

Briefly Describe the Event Idea: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The event is designed for  the church as a whole (all ages)  men only  women only  
 men and women  children  teens  
 young adults (college to late 20's)  30-somethings  senior adults

The event fits within the following existing ministry:

- Children  Deacons  JOY Group (Just Older Youth / Senior Adults)
- Life Groups  Men  Women
- Worship  Young Adults  Youth

List three (3) potential dates in the order of your preference. The Staff will consult the general church calendar to determine the best fit. (If your requests do not fit with already-planned events on the general calendar, the Staff may suggest an alternate.)

1) \_\_\_\_/\_\_\_\_/\_\_\_\_ 2) \_\_\_\_/\_\_\_\_/\_\_\_\_ 3) \_\_\_\_/\_\_\_\_/\_\_\_\_

Times Requested (please allow time for set-up and clean-up): \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM.

The actual event will take place from \_\_\_\_\_ AM / PM to \_\_\_\_\_ AM / PM.

If you are planning an on-going event, list the beginning and ending dates.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Room(s) Requested (please mark all that apply for this event).

- Alley Classroom (Please specify color: \_\_\_\_\_)
- Alley Large Room \*       Fellowship Hall       Hospitality Room
- Hub \*       Kitchen       Wonderland
- Worship Center \*       Yellow Room (Lower Level Classroom)

• Rooms with an asterisk (\*) are alarmed. You must coordinate with someone who already has an alarm code for access to the room.

Projected cost of the event: \$ \_\_\_\_\_

From which church budget line item will the money come? \_\_\_\_\_

Will participants be asked to supplement the church budget for some of the cost?  Yes  No

If yes, what is the charge per person? Adult – \$ \_\_\_\_\_ (ages of adults: \_\_\_\_ to \_\_\_\_)

Child – \$ \_\_\_\_\_ (ages of children: \_\_\_\_ to \_\_\_\_)

Family Maximum: \$ \_\_\_\_\_ (immediate family)

Does this event require a reservation?  Yes  No

If yes:  I understand I may set the deadline date once an event date has been selected.

The deadline needs to be \_\_\_\_\_ prior to the event (ie: 2 Sundays prior).  
Number      Weekday (Sunday, Wednesday, etc.)

### Agreements

By signing below, I agree to:

- follow the marketing plan provided by the Staff.
- ensure all rooms I reserve are reset to the way they were when I entered including wiping down tables and chairs, sweeping if needed, and taking the garbage to the dumpster.
- ensure lights are turned off in the whole building when I leave.
- ensure the whole building is secure when I leave.

\_\_\_\_\_  
Requesting Party

#### Office Use Only

Date the Form was submitted to the Office: \_\_\_\_/\_\_\_\_/\_\_\_\_

Staff Meeting Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

This fits  Come  Belong  Share.

This falls under the \_\_\_\_\_ ministry.

Approved:  Yes  No  Needs Follow-Up Staff Initials: \_\_\_\_\_

Date Person Notified: \_\_\_\_/\_\_\_\_/\_\_\_\_ by (initials): \_\_\_\_\_

Key(s) Picked Up: \_\_\_\_/\_\_\_\_/\_\_\_\_ Staff Initials: \_\_\_\_\_

Key(s) Returned: \_\_\_\_/\_\_\_\_/\_\_\_\_ Staff Initials: \_\_\_\_\_