

VILLAGE BIBLE CHURCH
EMC - EVENT / MEETING / COMMUNICATION FORM

PLEASE RETURN THIS FORM TO ADMIN. ASSISTANT

Initial Submission
Further Information
Change # _____

1

Today's Date: _____	Form Submitted by: _____
Name of Event: _____	Phone # _____
Date of Event: _____	Email Address _____
Time of Event: _____	Ministry Team Represented: _____

I would like to: (fill out appropriate section below)

_____ Schedule an event/meeting on the calendar	_____ Submit Communcation request
_____ Submit a Sunday bulletin announcement	_____ Reserve a room (# of people _____)
	_____ Request a <i>Moment for Missions</i>

SPEAKER PRESENTER INFORMATION

Please attached a brief paragraph with bio information

2

For : _____ Moment For Missions _____ Ministry Spotlight _____ Other _____

Name _____ Phone: Cell _____ Work _____

Email _____

FACILITY NEEDS

3

_____ Sanctuary _____ Upstairs Loft/Classrooms _____ Fellowship Hall _____ Lobby _____ Classroom(s) _____ #/people

_____ Parlor _____ Prayer Room _____ Nursery _____ Kitchen _____ Other _____

Need Building Key Date Checked out _____ Checked out by _____ Date Returned _____

Who, from your group, will be locking up the building after your event: _____

COMMUNICATION

(All information should be provided by submitting party.)

Please attach a paper copy and email an electronic copy to vbchurch@sbcglobal.net

4

_____ Mass e-mail (date to be sent _____) _____ Bulletin Announcement (dates to print _____, _____)

_____ Bulletin Insert (date inserted _____) _____ Village Voice (date to print by _____)

_____ Website announcement (date to be posted _____) _____ Prayer Sheet announcement

_____ Newsletter Article [Article submission by 15th of month before _____ (insert month)]

_____ Video Presentation (Must be Media Ready and provided at least 2 weeks in advance.)

_____ Video Recording & Production (You will be contacted prior to date of event.)

Two-sentence announcement for Bulletin/Prayer Sheet: _____

DISPLAY TABLE FOR FOYER

5

Date(s) of Display _____ (Display tables are 6 ft long.) Need a tablecloth? _____ Yes _____ No

Display will be "manned" by _____

Display set up by person(s) phone _____ email _____

Will products be marketed (tickets, CDs, books, etc.) Type of product _____

Will money be received: _____ Yes _____ No

Instructions for reservations/sales made by office during work week : _____

_____ I understand that it is my responsibility to have the contents removed/stored so that the display can be taken down in a timely manner.

6

7

8

9

10

Nursery Care? Child Care: Infant _____ Ages _____ # of Kids _____
 Yes _____ No _____ Toddler _____ Ages _____ # of Kids _____

10

FOR OFFICE USE ONLY

OR Conflicts to be resolved: _____

Please return this form with solution after conflicts are resolved.

Approval Confirmation _____ Phone _____ Email _____