Shalimar
United Methodist Church
REACH | TEACH | SEND

NEW EVENT FORM

Point of Contact Information:

First & Last Name: _____

Phone Number: _____

Email: _____

EMS Information

Date, Start Time, and End Time of Event: _____

If it repeats, for how many weeks? _____

Time for Setup & Clean Up: _____

Estimated Number of Attendees: _____

Method of Meeting: ☐ In-Person (Church Campus)   ☐ In-Person (Off Campus)

☐ Zoom Facebook   ☐ Community   ☐ Other

Room Requested & Setup: _____

_____

Event Details (this is the information for the event that goes on website)

Group Name or Event: _____

Event or Study (if different): _____

Event Summary:

_____

_____

_____

Communication Requests

Check All You're Requesting: ☐ Worship: Preservice   ☐ Worship: Church Life

☐ Outside Banner ($94)   ☐ Handouts/Invites (how many?)_____   ☐ 20 Yard Signs ($102)

☐ Newspaper (1st draft is written by requestor)

☐ Facebook (free)   ☐ Facebook ($25+)

☐ 100 Post Cards ($67)   ☐ Other_____

Allotted $Amount for Requests: _____

Account Number for Expenses:_____