

Event Information Sheet

To be turned in to staff person relating to your committee.

Event Name: _____ Committee: _____

Date of Event: _____ Time of Event: Starting ____ Ending ____

Location of Event (spaces/room #'s if at church *or* address if not at church): _____

Coordinator of Event (Name & Phone #): _____

Will Coordinator be present at event? Y or N If not, who will be in charge: _____

Cost: _____ Deadline for Collection at Church: _____

Do you need to send deposits? If so, when, where, and how much? _____

Do you need a cash box? If so, specify details _____

Food Preparation/Purchase needed? Food Request/Purchase Form turned in?

Who are the expected participants? _____

Church Vehicle Requested (Please circle/fill out a calendar form to reserve):

Bus Van *or* Both

Must have an approved van driver – check with staff for approved names

Date(s) of any further planning meetings: NA *or* _____

Dates to Advertise:

Oakleaf (check schedule): _____

Bulletin (deadline is Monday at noon): _____

Mailing (deadline 2 weeks prior): _____

Other: _____

Minute for Mission (as available): _____

- Please give to the staff member who is the liaison to your committee.