

Special Service/Event Planning Form

Fill out this form – submit a copy immediately to the Church Office so Pastor & Leadership are informed of your event. Keep your copy as a working document.

Name of Service/Event: _____ Date: _____
(Check Church Calendar)

Contact Person: _____ Phone: _____

Location/Building/Room: _____ Time: _____

Committee Responsible: _____ Number of People Attending: _____

- Did you discuss & gain approval from your Committee & Committee Chairperson? YES NO
 - If **YES** Continue – If **NO** Stop! Go back & get approvals.
- Which of the following persons or committees need to be involved in the planning?

- Please Check off all of the following elements needed for the Event:

	Made Contact	Check when Completed	Date
▪ Has the Lord lead you to conduct this event? Did you pray as a group first? Yes _____ No _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Church Calendar –Approved? Placed on Calendar?	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Have the guest speakers, musicians and the event been reviewed with the Council Chairperson or Church Administrator?	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Is there an expectation of Pastor involvement? Explain _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Special Music _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Video Projection (4 Week Notice – you do the PowerPoint work)			
▪ Theme/Title _____ Video or Slideshow _____ Video Only _____ Audio & Video _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Audio – (Randy Frey) Microphones? Sound for Video? _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Food & Beverage _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Table/Chairs/Room Setup _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Decoration/Theme _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Advertising – Internal (Bulletin by Tuesday, NL by 15 th of month) External (Local newspaper, bulletin boards, etc) _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Financials -Check budget -Contact Finance Chair - New fundraising approval -Contact Treasurer for payment(s)	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Other Instruction/Ushers/Offering _____	<input type="checkbox"/>	<input type="checkbox"/>	
▪ Facility Access/Code (From Church Office) _____	<input type="checkbox"/>	<input type="checkbox"/>	