

Room Request/Non-Routine Event Notification & Approval Form

Date the form was filled out:		Date of Approval:	
Event Name:		Requester:	
Event Start Date:		Event End Date:	
Event Start Time:		Event End Time:	
Is this a recurring event?	Details, if recurring event:		
Requester Phone:		Requestor Email:	
Room(s) Requested:	Preferred contact method:		phone email

Sponsorship Information:

Is this event a ministry program or sponsored by a ministry of Christ UMC?	
If yes which ministry? If no, who is the sponsoring organization?	Who is the staff/leadership coordinator for the event?

What resources do you anticipate you will need the church to provide for your event to succeed?

Yes	No	Resource	Description (Required)
		Communication/Advertising? <small>(If needed, please fill out an Announcement Form)</small>	
		Pastoral Support?	
		Financial Resources?	
		Technical Services?	
		Child Care?	
		Other _____?	
I would like to request a planning meeting to find out what resources are needed.			

If planning a non-routine event, please fill out items #1-4 (Ministry / Group Description and Vision)

- 1. How would you describe the need for this event?**
- 2. How do you envision this event will meet the need you have described above?**
- 3. Why is this important to you? What is leading you to have this event at this time?**
- 4. How do you see this event fulfills our mission to bring people into love relationships with God and others?**

Event Approval (office use only):	Authorizing Signature <small>(Write N/A if not req)</small>	Date:	Authorizing Signature <small>(Write N/A if not req)</small>	Date:
Time (is the space available?)			Trustees (Trustees Chair)	
Purpose and Vision (SLT chair)			Teams (Volunteer Equipper)	
Theological (Pastors)			Transmit (Communications Director)	
Technical (Tech Director)			Childcare (Student Ministries)	

If event was not approved, see reason and suggestions for resubmission attached

Approval to proceed with event:

