

# NEW MICKLE BAPTIST CHURCH

## Event Planning Form

In effort to provide efficient communication regarding your upcoming event, please complete all necessary spaces and return this form to the office at least 30 days prior to your event.

OFFICE USE ONLY	
Received By:	Date:
Approved By:	Date:

Ministry Name::	Today's Date:
Contact Person:	Home Phone:
Email Address:	Cell Phone:

Title of Event:	Date:	Time:
Type of Event:	Event Theme:	
Number of People Expected:		

### Office

Copy Given to Staff

Request creation of: <input type="checkbox"/> Signup Sheet <input type="checkbox"/> Insert/Flyer <input type="checkbox"/> Announcement Slide <input type="checkbox"/> Posters Amt: _____ <input type="checkbox"/> Bulletins <input type="checkbox"/> <b>Boxes</b> <input type="checkbox"/> PowerPoint Presentation <input type="checkbox"/> Tickets Amt: _____ <input type="checkbox"/> Postcards Amt: _____ <input type="checkbox"/> Insurance Waivers <input type="checkbox"/> Other:	Advertising: <input type="checkbox"/> Newspaper <input type="checkbox"/> Radio <input type="checkbox"/> Churches <input type="checkbox"/> Other:
Request announcement during service on:	Other Instructions:

### Facility

Copy Given to Ministry Chair

Person opening building day of event:	Time building open:	Person locking building day of event:	Time building closed:
Areas Requested: <input type="checkbox"/> Sanctuary <input type="checkbox"/> Foyer <input type="checkbox"/> Offsite <input type="checkbox"/> Fellowship Hall <input type="checkbox"/> Outdoor/ <input type="checkbox"/> Other: <input type="checkbox"/> Kitchen      Lawn			
Tables Requested: <input type="checkbox"/> 6-Foot Amt: _____ <input type="checkbox"/> Round Amt: _____	<input type="checkbox"/> Padded Chairs: # Per Table _____	Miscellaneous Requested: <input type="checkbox"/> Podium <input type="checkbox"/> Tablecloths <input type="checkbox"/> Dividers <input type="checkbox"/> Risers <input type="checkbox"/> Metal Folding Chairs <input type="checkbox"/> Baptismal	
Special instructions (e.g. platform cleared, fellowship hall empty):			

**Custodial**Copy Given to Staff 

<input type="checkbox"/> Set Up Help Requested	Day/Time: _____	Day/time you would like room/facility available:
<input type="checkbox"/> Take Down Help Requested	Day/Time: _____	
Special instructions:		

**Prayer**Copy Given to Team Chair 

<input type="checkbox"/> Team requested during event:	Prayer requests for event:
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**Kitchen**Copy Given to Team Chair 

Paper products requested: <input type="checkbox"/> Plates Amt: _____ <input type="checkbox"/> Cups Amt: _____ Special Instructions:	<input type="checkbox"/> Napkins Amt: _____ <input type="checkbox"/> Utensils Amt: _____	Food requested: <input type="checkbox"/> Coffee Amt: _____ <input type="checkbox"/> Lemonade Amt: _____ <input type="checkbox"/> Sugar/Creamer	<input type="checkbox"/> Condiments Amt: _____ <input type="checkbox"/> Butter Amt: _____ <input type="checkbox"/> Other (list) Amt: _____
Other Supplies Needed:			
Equipment Req: <input type="checkbox"/> China <input type="checkbox"/> Silverware <input type="checkbox"/> Coffee Maker <input type="checkbox"/> Refrigerator <input type="checkbox"/> Freezer	<input type="checkbox"/> Stove <input type="checkbox"/> Oven <input type="checkbox"/> Microwave <input type="checkbox"/> Warmer <input type="checkbox"/> Steamers	<input type="checkbox"/> Ice Chest <input type="checkbox"/> BBQ <input type="checkbox"/> Popcorn Mach <input type="checkbox"/> Cotton Candy Maker	Help requested (must be approved by ministry chair): <input type="checkbox"/> Meal Prep #: _____ <input type="checkbox"/> Clean Up #: _____ <input type="checkbox"/> Servers #: _____

**Technical/Music**Copy Given to Ministry Chair 

Sanctuary: <input type="checkbox"/> Sound <input type="checkbox"/> Special Lighting <input type="checkbox"/> Microphone(s) #: _____	<input type="checkbox"/> Computer <input type="checkbox"/> Podium	<input type="checkbox"/> Projector <input type="checkbox"/> Piano/Organ	Other Equipment: <input type="checkbox"/> TV <input type="checkbox"/> Laptop <input type="checkbox"/> Portable Projector	<input type="checkbox"/> DVD Player <input type="checkbox"/> VHS Player	<input type="checkbox"/> CD Player <input type="checkbox"/> Screen
Other Areas: <input type="checkbox"/> Sound Equipment <input type="checkbox"/> Microphone(s) #: _____	<input type="checkbox"/> Lighting	<input type="checkbox"/> Other:	Other Requests: <input type="checkbox"/> Photograph Event <input type="checkbox"/> Videotape Event		
People (must be approved by Pastor, Chairs of Deacons & Trustee Boards): <input type="checkbox"/> Sound Tech <input type="checkbox"/> Computer Tech <input type="checkbox"/> Ushers <input type="checkbox"/> Greeters <input type="checkbox"/> Musician(s) <input type="checkbox"/> Vocalist(s)					
Other instructions (e.g. John Doe is doing sound, PowerPoint needs audio):					

**Childcare**Copy Given to Ministry Chair 

Help requested for the following ages (must be approved by Youth Ministry chair):					
<input type="checkbox"/> 0-2 Years	#: _____	<input type="checkbox"/> 2-4 Years	#: _____	<input type="checkbox"/> 4-5 Years	#: _____
<input type="checkbox"/> 5+ Years	#: _____				

**Finance**

Estimated event budget: \$\_\_\_\_\_

- Budgeted from Ministry Chair line item: \_\_\_\_\_
- Unbudgeted, no finances from NMBC will be used unless expenses are **pre-approved** by the Joint Board
- Offering or proceeds will be collected. (CHURCH TREASURER will provide instructions.)
- If event is a fundraiser, it has been approved by the Joint Board as required.

**Please turn in an accounting of expenses and profits of your event for church records.**

**Any special needs or requests not covered.**

Submit Button will only work if filling out from in Adobe. If filling out form in browser window download the form once complete and then attach file and email to: [theresabratten8@gmail.com](mailto:theresabratten8@gmail.com).

Submit Form