CALENDAR REQUEST FORM

Name of Event/Group_____________________________________________________________

Date of Event ___________________ Time from____________ to ________________

Estimated Attendance: _______ Person coordinating the event: _________________

Daytime contact # __________________

Sponsoring Committee: __________________________ Chairperson Signature: ___________________

Duration of event: Weekly _______

Bi-weekly (every 2 weeks) _______

Semi-monthly (2x/month) _______

Monthly _______

One-time _______

***** Please Note: Committee Chair Responsibilities

Building Access/Fobs
The Chair of the Committee sponsoring the event is responsible for arranging access to the building for the event by ensuring that the Event Coordinator has a fob and is given the necessary security training. If the event is a standard on-going event, that person may be supplied a fob by the office upon approval from the Minister and President.

If your event requires more than general notification and access to the building (category A), please complete the second page of this form in its entirety to ensure that it has necessary set-up and staff coverage.

Room Assignment
We will make every effort to accommodate your room preference. However, standing events may make this prohibitive. If you are co-sponsoring an event with an outside organization or group, building rental fees are separate and may apply.

(SEE OTHER SIDE)
Please choose the category for your event and supply the requested information.

_____ Category A. The sponsored event is primarily for or exclusively for church members. No special set-up is needed (or the sponsor will leave set-up as it was found) and no staff presence is required for entry, lock-up, sound or building monitoring (e.g. Dream Group).

Room preference is ______________________________

_____ Category B. The event is primarily for or exclusively for church members. It does require some limited special set-up by staff (e.g. Movie Night) but no staff presence is required.

Room preference is ______________________________.

Describe desired set-up. On another piece of paper, please draw a diagram and specify number of chairs and tables, direction they should face. If you need a DVD/VCR or flip chart, please indicate where.

_____ Category C. The event requires the presence of the sound technician or monitor and/or extensive staff set-up/take down or presence for the event. Please note that many of these events (fundraisers, committee-sponsored community events) will be charged $25 an hour (a minimum number of hours may apply) for set-up/take-down and staff presence on-site unless the fee is waived. All events using the sound system require the presence of staff or a member of the Sound Team.

Does this require staff presence? If so, in what capacity?

Out of what budget will staff be paid?

What room(s) do you want to reserve?

On a separate piece of paper:

A) Describe the overall event (number of participants, what it is, etc.) and the various elements (musicians, speakers, talk/back with microphone, panel discussion, transmissions to outer space etc.)

B) Provide a detailed diagram of set-up needed in each room.

Additional equipment requirements: (check if appropriate and indicate # if known)

Microphone(s) / sound system ______ Video playback? DVD ______
Riser(s) ______ VHS ______
Podium ______ Flip chart easel # ______

Other (describe)