

EVENT REQUEST & INFORMATION FORM



First Baptist Church of Webster

173rd SE 1st Ave., Webster, FL 33597

Office: 352-793-3738 Fax: 352-793-3336

Name of Event : _____

Date(s) of Event: _____

Set-up Date: _____ Time: _____ Clean-up Date: _____ Time: _____

Event Date: _____ Time: _____

Your Name: _____ Phone: _____

Email: _____ @ _____

Your Ministry: _____

Please submit this form AT LEAST 30 days prior to event.

- 1. Meet/ Discuss overview of event with Pastor. Sign & approved by Pastor X _____
- 2. Check calendar and/or buildings being used with secretary in office.
- 3. If you are planning to use a Small Group Classroom please be courteous and speak to the Teacher(s) AFTER confirming the requested date is open. Teachers must initial this form or contact the church office with their approval.

_____ <input type="checkbox"/> Sanctuary	_____ <input type="checkbox"/> _____ SS Room
_____ <input type="checkbox"/> Fellowship Hall	_____ <input type="checkbox"/> Use of Grounds only (no restrooms)
_____ <input type="checkbox"/> Kitchen	_____ <input type="checkbox"/> Use of Grounds & Restrooms
_____ <input type="checkbox"/> A/V Team _____ (Agreed time)	

Reservation Information

Who is responsible for setup & cleanup? _____

Who will unlock & lock the church? _____

(If applicable) Have arrangements been made to pick up/ drop off keys? _____ YES?

When & Who? _____
If you have completed the above steps, you may now submit to the church secretary in the office & proceed to fill-out and turn in the Bulletin Announcement & Advertisement Form (if needed).

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:Office use: Confirmation of Event Approval: _____
:Calendar Date Approve by: _____ Calendar Updated by: _____
:Deadline or other notes: _____
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