## **FUMC MEETING-CLASS-EVENT REQUEST FORM**



2901 Caledonia Street, Marianna, FL 32446 | 850-482-4502 nichole.mariannafirst@gmail.com - updated 3/24

*Event Start Date:	*End Date:	*Recurring? Yes	No *Begin Time	::*End Time:
*Recurrence Info (days of w	eek, frequency, etc.):			
*Mtg/Class/Event Name:				
*Leader:	*Co	ntact #:	*E-mail:_	
*Leader:	*Co	ntact #:	*E-mail:_	
*Event Set up Date:	*Set up Time:			
*Responsible party for set up		*	Contact #:	
*Responsible party for clean-	up	*	Contact #:	
*Building Requested: Sanct	uary   Education   Wesley	Center   Youth   Har	rison   Off-Site *Spec	cific Room Requested:
*Est. # Participants:	*Key Needed: Ye	es No *Nursery r	needed? Yes No   If	yes, how many children?
*Supplies needed: ice   table  *Tables: round # 8' r  *Table & Chair SET-UP:(draw of the content of the co	eware: disposable reusable ctangle # Chairs on backside if needed)ent requests: Yes No   If	ole (needs to be washed s: #   Are w f yes, describe:	i)   plates cups f hite paper tablecloths	
* <b>Publicize?</b> Yes No *Public	cize Where?: Bulletin   5th	Page   Facebook   \	Website   Wednesday	v Night Live   Other:
Study Material Required: Yes  *# Needed: *Study				
*Costs for Books/Class/Event				

Requests should be submitted a minimum of 3 weeks before the event is to be publicized, not before the event's actual date. Newsletter deadline is on the 15th of each month.

This form must be completed in full & returned to the church office.

## FOR OFFICE USE ONLY

Approved: Yes No   Approved by:	Approved Location:			
Date Submitted:				
Key issued: - Yes No   Date checked out:	by:   Key returned: Yes No			
Date entered on Google Calendar:	_			
Nursery workers contacted: Yes No				
Food ordered from:	Food orde	red by:	Date food Ordered:	
Books ordered from:	Da	te order placed:	Cost per book:	
A/V Equipment Needed:		Date Given to A/V Technician:		