



Dr. Kenneth L. Samuel, Pastor & Organizer

## Event /Activity Planning Form

The Event /Activity Planning Form is designed to help Coordinators successfully plan ministry events and activities.  
**Instructions:** Please complete the form by the Quarterly Proposal deadline and present it at the Program Council meeting. REMINDER: ALL CONTRACTS MUST BE REVIEWED, APPROVED, AND SIGNED BY THE DIRECTOR OF OPERATIONS OR THE PASTOR. THERE ARE NO EXCEPTIONS. *THE CHURCH WILL NOT BE RESPONSIBLE FOR UNAPPROVED EVENTS AND OR COMMITMENTS.*  
 The form will be reviewed by the Program Council and approved by the Total Quality Management Team before the beginning of the new quarter.  
 COORDINATORS ARE RESPONSIBLE FOR COMPLETING AND ATTACHING ALL REQUEST FORMS. THE PROGRAM COORDINATOR WILL ROUTE THE FORMS TO THE APPROPRIATE RESOURCES THAT ARE CHECKED BELOW; HOWEVER, COORDINATORS ARE ENCOURAGED TO CONFIRM REQUESTED RESOURCES TO ENSURE ALL NECESSARY SUPPORT FOR EVENTS/ACTIVITIES.

### Ministry Information

Date Submitted: \_\_\_\_\_

Ministry Name: \_\_\_\_\_ Coordinator's Name: \_\_\_\_\_

Contact Phone Number: Day \_\_\_\_\_ Evening \_\_\_\_\_ E-Mail/FAX \_\_\_\_\_

### Event Information

Event Name: \_\_\_\_\_ Event Date: \_\_\_\_\_

Description of Event: \_\_\_\_\_  
\_\_\_\_\_

What is the Anticipated Spiritual Outcome of this event? \_\_\_\_\_  
\_\_\_\_\_

Is your event a fundraiser, or will the church receive income: Yes \_\_\_ No \_\_\_ If yes, please detail your plans below:

### Meeting Dates - Please list all planned meetings for the quarter (include: dates, place, time, etc.)

Name of Meeting	Date	Place	Time

### Resource Requirements (Please attach all applicable forms)

Announcements     Appeals     Office Work Request     Room Request  
 Voucher Request     Media     Music     Ushers (# Rows Reserved)  
 Deacons     Greeters     Parking     Nursery  
 Culinary     Security Bus/Van     Other (Please Specify) \_\_\_\_\_

Special Advertising/Marketing (e.g. banner, PSA) \_\_\_\_\_

Is a speaker required?? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list suggested speaker \_\_\_\_\_

Is an honorarium required? \_\_\_\_\_ Yes \_\_\_\_\_ No