



## New Work Fellowship Church Calendar Request Form

*Please fill out all the information below and submit to church office for approval.*

<b>EVENT:</b>	
<b>DATE:</b>	<b>Is date open?</b>
<b>ACTUAL EVENT TIME:</b> (Circle AM or PM) From:        AM/PM    To:        PM	<b>Time including set up and break down</b> From:        AM/PM To:        AM/PM
<b>REQUESTED PLACE:</b> Preferred: _____ Alternative: _____	
<b>SPONSORED BY:</b>	<b>NWF Ministry?</b>
<b>PERSON RESPONSIBLE FOR EVENT:</b>	
Name: _____	Home #: _____ Work #: _____
<b>EQUIPMENT NEEDED:</b> _____	
Sound system, Audio/Visual, other	<b>Have Arrangement been made?</b>
<b>KEY TO BE CHECKED OUT BY:</b>	
Name: _____	Cell #: _____ Work #: _____
<b>PERSON RESPONSIBLE FOR CLEAN-UP:</b>	
Name: _____	Home #: _____ Work #: _____

**OFFICE USE ONLY**

Date received: \_\_\_\_\_ (date)

Received by: \_\_\_\_\_ (name)

Is Date Open? \_\_\_\_\_ (Y/N Initials)

Staff Approval: \_\_\_\_\_ (Y/N date)

Date put on calendar: \_\_\_\_\_

Assigned Place: \_\_\_\_\_

Custodian notified: \_\_\_\_\_

Child Care notified: \_\_\_\_\_