



# God's Vision Ministries, Inc

## Meeting/Event Request Form

*X Please Note: This Meeting/Event must be APPROVED to appear on the Church Calendar.*

Name of Ministry/Group: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Name of Person Submitting Form: \_\_\_\_\_

<b>Office Use Only:</b>
Received by:
Date Submitted:

**Contact Information:**

Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Regularly Scheduled Meeting     Special Meeting/Event     Food will be served

\_\_\_\_\_ Weekly    \_\_\_\_\_ Special Setup Required    \_\_\_\_\_ Monthly    \_\_\_\_\_ Quarterly

Time setup must begin: \_\_\_\_\_ be completed: \_\_\_\_\_

Time cleanup must be completed: \_\_\_\_\_ off property by: \_\_\_\_\_  
*(Determined by Office)*

Request Meeting/Event to be placed on Church Calendar  
\_\_\_\_\_ Church    \_\_\_\_\_ Announcements    \_\_\_\_\_ Newspaper(s)    \_\_\_\_\_ Bulletin  
Other \_\_\_\_\_

Purpose of Meeting/Event: \_\_\_\_\_  
\_\_\_\_\_

Facilities/Rooms Requested: \_\_\_\_\_ Parlor    \_\_\_\_\_ Kitchen    \_\_\_\_\_ Sanctuary  
\_\_\_\_\_ Classroom(s) #: \_\_\_\_\_

*\*Facilities and equipment must be cleaned and returned to their regular setup following the close of meeting or event.*

Alternate Location (Facility): \_\_\_\_\_ Phone #: \_\_\_\_\_

Room Rental: \$ \_\_\_\_\_ Additional Rental Fees: \$ \_\_\_\_\_ Est. Food/Beverage: \$ \_\_\_\_\_

*\*Alternate location reservations are "Tentative" until meeting/event is approved and Financial Request Form has been completed.*

Assistance requested of additional ministries or staffing:

\_\_\_\_\_ Pastor/Minister: *A special request must be submitted in writing to the Church Secretary.*

\_\_\_\_\_ Music Ministry: *A special request must be submitted in writing to the Church Secretary.*

\_\_\_\_\_ Audio/Visual: \_\_\_\_\_ Microphones    \_\_\_\_\_ Overhead Projector    \_\_\_\_\_ Other Equipment: \_\_\_\_\_

\_\_\_\_\_ Ushers/Greeters    \_\_\_\_\_ Deacons/Trustees    \_\_\_\_\_ Additional Request: \_\_\_\_\_

\_\_\_\_\_ TurnKey/Security    \_\_\_\_\_ Maintenance    \_\_\_\_\_

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

Meeting/Event Approved     Meeting/Event Denied     Additional Information Needed  
 Facilities/Rooms Approved     Facilities/Rooms Denied

GVM Board Member: \_\_\_\_\_ Assigned Board Member: \_\_\_\_\_

Completed by: \_\_\_\_\_