

ISRAEL BAPTIST CHURCH OF BALTIMOR CITY

Rev. H. Walden Wilson, II, Pastor

EVENT FORM-Revised 6/08

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

All Ministry Leaders and Annual /Emphasis Day Chairpersons MUST complete this Event Form in triplicate at least 90 ninety (90) days prior to the activity. No verbal or written obligation or contract should be committed until the event is approved both by Pastor's Administrative Assistant (date and time), Event Coordinator (no duplication of events, to assist with event/activity where and when needed, to insure all guidelines are followed), and Business Manager/Trustee (to address all financial/contract matters). All contracts and other paperwork regarding finance, must be submitted to Business Manager's office/Bro. James Gardner before final approval will be granted. All necessary steps must be followed before any activity will be approved.

NAME OF MINISTRY/COMMITTEE: \_\_\_\_\_

NAME OF EVENT/ACTIVITY/SPECIAL DAY: \_\_\_\_\_

REQUESTED DATE AND TIME: 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_

PURPOSE OF EVENT: \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

MINISTRY NEEDS FOR EVENT

- ❖ Sound ..... Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Media ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Culinary ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Fellowship ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Music ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Security ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Publicity ----- Yes \_\_\_\_\_ No \_\_\_\_\_
- ❖ Church Office ----- Yes \_\_\_\_\_ No \_\_\_\_\_  
(Printing of Programs, Envelopes, Fliers, Tickets, etc.)
- ❖ Transportation ----- Yes \_\_\_\_\_ No \_\_\_\_\_

Is a donation required from attendees? \_\_\_\_\_ Yes \_\_\_\_\_ No

Projected income: \_\_\_\_\_

Planning to make a financial profit from event: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ How much?

Itemized Expenses: \_\_\_\_\_

\_\_\_\_\_

Is there a contract? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, forward to Business Manager for signature.

Ministry Leader Signature: \_\_\_\_\_

Telephone Numbers \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Work

E-Mail Address: \_\_\_\_\_

EVENT APPROVED: \_\_\_\_\_ EVENT NOT APPROVED: \_\_\_\_\_

First Copy: Event Coordinator

Second Copy: Pastor Admin. Asst.

Third Copy: Business Office