

Meeting & Event Request Form



In order to ensure the support and success of all ministries of LCR, all events need to be reported to the Church Office. Our staff will review this information, identify ways to support your events and make recommendations about events. This form should be turned in to the Church Office at least 3 weeks prior to your event, meeting or program.

Thank you for your cooperation!

Event Information

Event Name _____ Sponsoring Team _____

Event Contact _____ Phone Number _____

Contact Email _____ # of ppl expected _____

One Time Events:

Preferred Date _____ Alternate Date _____

Event Times _____ Set-up by _____ Break-down by _____

Space Requested

___ The Gathering Room

___ Conference Room

___ FLC Room # _____

___ Kitchen

___ Library

___ Sanctuary

___ Robinwood

___ Youth Pavilion

___ Other _____

Equipment Needs
Include number, as needed

___ Microphone(s)

___ Choir Platforms/Risers

___ TV ___ VCR ___ DVD

___ Projector ___ Screen

___ Easel ___ White Board

___ Other _____

Recurring Events
Please provide information here if your event is recurring

Meeting Times _____

Preferred meeting day M T W Th F Sa Su

Occurs Weekly Monthly Quarterly

Exceptions _____

Communications
Event Communication is key to success! Please remember to send any flyers, posters, graphics, etc. to the Church Office.

The Weekly Dates _____

Slideshow Dates _____

Promo Video Dates _____

Other _____

Collecting Money
Please be sure that you touch base with the Church Office to put a plan in place for collecting and processing money for your meeting/event/program. Thank you!

___ I plan to collect money for my event/meeting

Office Use Only Date Approved _____ Staff Liaison _____ Confirmed w/ contact on _____