



inForm

Date Submitted: _____

Name of Event _____ Location if off-site _____

Event Date/s _____ Start-End Times _____ Set-up/Take-down Times _____

Contact Person: Name/Email/Phone # _____

Minister _____ Signature & Date _____

ROOMS REQUESTED *(Final room assignments will be decided by scheduler based on availability/church needs.)*

____ Chapel ____ Fellowship Hall ____ Gym ____ Music Room ____ Sanctuary ____ Fam. Worship Room
____ 342 ____ Youth Room ____ Room 121 ____ Room 122 ____ Room 123 ____ Room 124
____ Room 125 ____ The Lodge Other _____
____ Wayside Lobby ____ Wayside Café *If you have marked this option requesting coffee sales outside of regular hours of operation, the Wayside Mgr. will contact you for details, or you may contact her.*

SET-UP NEEDS

of People Expected _____

60" Round Tables # _____

8' Rectangular Tables # _____

6' Rectangular Tables # _____

Chairs per table # _____

Chairs (theater style) # _____

Table Linens # _____

Lectern # _____

Other _____

Facilities will contact you if more information is needed. Please include a sketch of set-up desired on separate page or back of page, including any additional notes.

COMMUNICATIONS

____ Publicity/Advertising Requested

If checked, please notify Lisa Priestley with the date and a brief description of the event. Together you will work out the details.

Event fee \$ _____

____ Registration online

You are responsible for creating registration with Planning Center. Please email the completed registration link to lpriestley@uppc.org

CHILDCARE

____ Need for children 4 mos.-5 years.

Number of children expected _____.

Early Childhood Dir. will contact you to confirm for your event. UPPC nursery employees must be available to schedule childcare.

KITCHEN NEEDS

____ Food will be served ____ Catered

Person/Place preparing _____

You are encouraged to fill water pitchers and make coffee for your event. Check the boxes for water and coffee only if you need help from facilities, and facilities manager will contact you.

____ Water Pitchers ____ Coffee

IS THIS A FUNDRAISER?

for: _____

____ We have pre-approval from Finance Team.

A/V EQUIPMENT/SUPPORT NEEDED? _____

Media Coordinator will contact you for detailed information. Only approved technicians may operate sound and video systems in sanctuary or gym.

OTHER INFORMATION:

FOR OFFICE USE ONLY

Facilities	_____	Wayside	_____
Communications	_____		
Caring	_____	Scheduling	
Childcare	_____	____ Calendar	
Pastor's Calendar	_____	____ S Drive	
A/V	_____	____ Email	