

The Leesburg Community Church
Ministry Event Request Form

To have your activity, ministry table and room(s) approved and put on the church calendar, please follow these steps:

1. Complete side one of this form if your activity needs space in the building. Use side two if your activity will be held at another location. If you are setting up a ministry table for this event, please complete the attached *Ministry Table Request Form* and submit with your Ministry Event Request. A copy of the new Ministry Table Guidelines is also attached. Please read and follow the guidelines.
2. Submit this form to Lou Sheets by putting it in her mailbox in the work room or faxing to 703-779-2018. Requests must be submitted at least 2 weeks prior to the event.
3. Please allow one week for processing.
4. You will be notified via phone or email when approved.

Event to be held in the building

Today's Date: _____ Contact Person: _____

Your Name: _____

Address: _____

Phone Number: (H) _____ (W) _____ Email: _____

Name of Ministry Event: _____

If Youth Event, Name of Adult Leader _____ Phone _____ Cell _____

Estimated number of people _____

Date of Event: _____ Start Time: _____ End Time: _____

Set up Time _____ Clean up Time: _____

Purpose of event:

Room or space requested:

Do you need a room for child care? If yes, please complete. No. of children _____ Ages of children: _____

_____ Outside/Picnic Area

_____ Small Chapel

_____ Trailers

_____ Traditional Sanctuary

_____ Parlor

_____ Kitchen

_____ Classroom # _____

_____ Great Room

_____ Youth Room

_____ Main Hall/Concourse

_____ Library

_____ Gym

_____ Fellowship Hall/Cafeteria

_____ Conference Room

_____ Other

Equipment needed:

_____ Sound (Tech person needed)

_____ TV/VCR

_____ Podium

_____ Overhead

_____ Grease Board/Flip Chart

(If sound is needed, there will be a charge for a Tech Team person. This charge is to be added into the cost of your event.)

**The Leesburg Community Church
Off-Site Ministry Event Request**

Today's Date: _____ Contact Person: _____

Your Name: _____

Address: _____

Phone Number: (H) _____ (W) _____

Email: _____

Name of Ministry Event: _____

If Youth Event, name of Adult Leader _____ Phone _____ Cell _____

Estimated number of people _____

Date of Event: _____ Start Time: _____ End Time: _____

Purpose of event:

Where will the event take place?