



2325 Roswell Rd. Marietta, GA 30062
 Phone: 770-971-3643
 Fax: 770-971-4169
 Email: office@eastcobbumc.org

Today's Date: _____

Calendar Event Form

(see reverse side for Newsletter/Bulletin Publication)

Event Name:			
Contact Person:		Contact Phone #:	
Email Address:			
Ministry Area Group:			
Event Coordinator(s):			

Please Note:

1. All requests must be submitted to the **Office Administrator** at least **2 weeks** prior to the event.
2. **Nursery, Sound System, and Overhead Projector require specific approval.**
3. **All event set-up/teardown is the responsibility of the event coordinator.**
4. **Complete the form in its ENTIRETY.**

<p>Event Day(s) of the week: _____</p> <p>How Often? _____</p> <p>Beginning Date: _____ Ending Date: _____</p> <p>Event Start Time: _____ Event End Time: _____</p> <p>Amount of time to Setup: _____</p> <p>Amount of time to Tear-Down: _____</p>	<p>Main Building: <input type="checkbox"/> Sanctuary <input type="checkbox"/> Parlor <input type="checkbox"/> 103 <input type="checkbox"/> 105 <input type="checkbox"/> Library <input type="checkbox"/> Crossroads <input type="checkbox"/> Choir Room</p> <p>Children's Wing: <input type="checkbox"/> 113 <input type="checkbox"/> 115 <input type="checkbox"/> 116 <input type="checkbox"/> 117 <input type="checkbox"/> 118 <input type="checkbox"/> 119 <input type="checkbox"/> 120 <input type="checkbox"/> 121</p> <p>Activities Building: <input type="checkbox"/> Kitchen <input type="checkbox"/> Upstairs <input type="checkbox"/> 201 <input type="checkbox"/> 202 <input type="checkbox"/> 203 <input type="checkbox"/> 204 <input type="checkbox"/> 205</p> <p>Annex Building: <input type="checkbox"/> Annex 1 <input type="checkbox"/> Annex 2 <input type="checkbox"/> Annex 3 <input type="checkbox"/> Annex 4</p> <p>Other: <input type="checkbox"/> Front Lawn <input type="checkbox"/> Parking Lot <input type="checkbox"/> Off Campus @ _____</p>
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<p>Audio-Visual Needs:</p> <p><input type="checkbox"/> Sound System Approved: _____</p> <p><input type="checkbox"/> Overhead Projector Approved: _____</p> <p><input type="checkbox"/> TV/VCR</p> <p>Key/Entry:</p> <p>Do you have key access? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>What time will doors need to be open? _____</p> <p>Which Doors? _____</p>	<p>Other Amenities:</p> <p><input type="checkbox"/> ___ Tables <input type="checkbox"/> ___ Chairs <input type="checkbox"/> Flip Chart <input type="checkbox"/> Podium</p> <p><input type="checkbox"/> White Board <input type="checkbox"/> Helium Tank <input type="checkbox"/> Popcorn Machine</p> <p><input type="checkbox"/> Childcare Approved: _____</p> <p># of children & ages _____</p>
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Office Use Only:

Approved

NOT APPROVED

Scheduled By: _____

Entered into Calendar

Doors to be open at: _____

CC: Rob Leanna Calissa

Publicity Needs:

ECUMC can provide publicity support when requested.

1. Copy must provided if requesting an article in *The Epistle* or *What's News*.
2. Publicity requests and required information must be submitted to the **Communications Specialist** at least **2 weeks** prior to the event.
3. The **Communications Specialist** reserves the right to edit/modify content for space considerations.

I would like this event to be publicized via:

- _____ *The Epistle* (monthly)
- _____ *What's News* (weekly)
- _____ Projected announcement in worship
- _____ Facebook/Twitter
- _____ Poster(s)
- _____ Flyer(s)

Article content/Copy
