

**Jamestown First Assembly of God**  
**Event Request Form**

Date submitted: \_\_\_\_\_

Please complete a separate Event Request Form for each event. It is our desire for all events to be well attended, and your efforts will be maximized by careful planning. To better serve your department in promoting and planning your event, providing transportation, promotion in bulletin, newsletter, webpage, facebook and reserving equipment or rooms we are asking for the following information:

Date of Event: \_\_\_\_\_ Time of Event \_\_\_\_\_

Group/Department: \_\_\_\_\_  
(who will be attending)

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Cost per person: \_\_\_\_\_

Event Activities: \_\_\_\_\_

Contact Person if the office has additional questions: \_\_\_\_\_  
Name Phone

Day and Time group will need the Facility or will be leaving: \_\_\_\_\_  
(Include time to set-up and or decorate and location of departure) Day Time

Day and Time event is over or group is expected to return: \_\_\_\_\_  
(Include time to clean up and place tables and chairs in order and location) Day Time

Location of Event: \_\_\_\_\_  
(Please be specific)

**ON-SITE EVENT**

Area of facility to be used: (Check all areas)

Nursery                       Kitchen                       Classrooms  
 Sanctuary                       Grounds, Outside area                       Fellowship hall  
 Other: \_\_\_\_\_

**OFF-SITE EVENT**

Does the Group need a People Mover?     Large People Mover     Small People Mover

Bus Driver Name and phone number \_\_\_\_\_

\_\_\_\_\_  
Department Leader                      Department Pastor                      Lead Pastor

Reason for denial of activity or recommendation: \_\_\_\_\_