

# *Event Packet*



DR. JACQUES BOYD, PASTOR

PLANNING AHEAD FOR GREATER  
KINGDOM IMPACT

# MOUNT BETHEL

## EVENT PACKET

The event packet should be turned in at least a month in advance

**EVENT DEFINED:** If it involves the church calendar, church finances, church space or some portion of the membership it is an event.

### **EXPLANATION OF FORMS:**

#### BUILDING USE FORM

- This form should be used to request the use of a particular space, room, building, etc. on the church campus. This form should be turned into the church's office at least one month before your approved event. **NOTE: ALL ROOM ASSIGNMENTS WILL BE DONE BY THE OFFICE.**

#### CHECK REQUEST FORM

- This form should be used to request funds that have already been approved or to request approval for funds not previously approved. Supporting paperwork should be turned in with this form to substantiate the funds that are being requested. Check request should be turned in at least two weeks before the funds are needed. Additionally, ministry group leaders should sign all check request that are being requested by the ministry in which you lead. Suggestion: When trying to determine price, we encourage you to make use of online price shopping as one of your options.

#### PRINTING REQUEST FORM

- This form should be used to request printing/copies, duplication, flyers, and other similar materials that will be used for the purposes of church ministry or other related church events. All printing request must have already been proofed and approved before a printing request is made. If outside printing is required, a copy of the approved check request should be attached to the printing request form. Printing request forms must be turned in at least one month before materials are needed.

#### MINISTRY BUDGET FORECAST

- The ministry budget forecast is designed to help with the planning of your event. It asks questions regarding the event, which assists you with overlooking or forgetting to handle various areas, when hosting an event. This form should be completed at least one month before your event.

#### EVENT EVALUATION FORM

- This form should be completed after your event. A copy of the completed Event Evaluation Form should be turned in to the church office no later than one week after your event. This form is designed to help your team review what was successful and unsuccessful during your event, with the goal of honest evaluation and implementation of adjustments.

# BUILDING USE FORM

Name of Ministry: \_\_\_\_\_

Please Mark Space You Are Requesting:

Sanctuary       Fellowship Hall       Class Room       Zoom       Outdoors

Signature of Ministry Director: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number(s): cell \_\_\_\_\_ other: \_\_\_\_\_

**\*\*\*\*ROOM ASSIGNMENT WILL ONLY BE DONE BY THE OFFICE.\*\*\***

## PURPOSE FOR BUILDING USE

Ministry Meeting

Community Event

Other: \_\_\_\_\_

Date of Function: \_\_\_\_\_

Event Start Time: \_\_\_\_\_ AM PM      End Time \_\_\_\_\_ AM PM

On the day of my event, I would like to arrive at: \_\_\_\_\_ AM PM

## Preparation/Set-Up Information:

Set-Up Date (If Applicable): \_\_\_\_\_

Set-Up Start Time: \_\_\_\_\_ AM PM      Set-Up End Time \_\_\_\_\_ AM PM

Number of People Attending: \_\_\_\_\_

How will the room be set-up to receive the attendants:

Tables & Chairs

Chairs Only

No Tables or Chairs

## Equipment Needed For The Event

\_\_\_ Tables: How many \_\_\_\_\_ Choose One       Round       Rectangle

**Note: Round tables will only be available in the fellowship Hall**

\_\_\_ Chairs: How many \_\_\_\_\_

\_\_\_ Dry Erase Board

\_\_\_ Microphone

\_\_\_ Streaming Equipment

\_\_\_ Podium

\_\_\_ Other: \_\_\_\_\_

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FOR OFFICE USE ONLY

RECEIVED BY: \_\_\_\_\_

RECIEVED ON: \_\_\_\_\_

APPROVED: \_\_\_\_\_ NOT APPROVED \_\_\_\_\_

ROOM(S) ASSIGNED: \_\_\_\_\_

DATE NOTIFIED \_\_\_\_\_ NOTIFIED BY \_\_\_\_\_

SIGNATURE OFFICE APPROVAL : \_\_\_\_\_

## PRINTING REQUEST FORM

This form should be used to process printing requests through the church office. **Only the final proofed master should be submitted when requesting copies.** The request should be turned in no later than two (2) days before you need the materials. The Ministry Director should sign this request.

Date Submitted: \_\_\_\_\_ Date Needed/Due: \_\_\_\_\_

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Name of Event/Project: \_\_\_\_\_

Date of Event/Project: \_\_\_\_\_

Name of Ministry Requesting Printing: \_\_\_\_\_

Signature of Ministry Director: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number(s): cell \_\_\_\_\_ other: \_\_\_\_\_

Type of paper (color/card stock): \_\_\_\_\_

Number of copies: \_\_\_\_\_

Has the master copy and/or electronic pdf been through the procedures for proofing?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If not, please do not submit request until proofing procedures have taken place.

Is the cost of printing request a part of your approved annual budget? \_\_\_\_\_ Yes \_\_\_\_\_ No

**\*\* Please note that the actual printing of materials is not what requires time; however, it is the proofing procedure, sorting, folding and/or stapling that may delay the processing of the print request.\*\***

## MINISTRY BUDGET FORECAST

**Describe proposed project/event:** *(Remember that at least one event should be an outreach effort. Try something new.)*

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

**Name of Ministry Hosting Event:** \_\_\_\_\_

**Proposed Date:** \_\_\_\_\_ **Alternative Date:** \_\_\_\_\_

**Event Time (Start & End Times):** \_\_\_\_\_

One-time activity       Proposed annual event       On-going monthly activity

Other: \_\_\_\_\_

**Is this an approved calendar event for your ministry?** \_\_\_\_\_

**Purpose:** \_\_\_\_\_

\_\_\_\_\_

**Theme/Scripture Reference, if applicable:** \_\_\_\_\_

\_\_\_\_\_

**This event will benefit Mount Bethel and or the community by:** \_\_\_\_\_

\_\_\_\_\_

**Goal: as a result in attending this project/event individuals should better understand:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Target Audience

Children       Youth       18 – 25       26 – 35

36 - 45       46-55       Men       Women

Partners       Guests       Other: \_\_\_\_\_

**We intend to impact the target audience/group by:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Event Coordinator:** \_\_\_\_\_ **Contact Number:** \_\_\_\_\_

**Event Coordinator Task(s):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Task(s) Deadline:** \_\_\_\_\_

**Event Speaker(s):** \_\_\_\_\_

**IMPORTANT: DO NOT CONTACT SPEAKER BEFORE APPROVAL FROM SENIOR PASTOR**

**Dates For Plannings Meetings:** list all planning meeting dates for the event. Be sure that the building request forms are completed for each of your meetings and turned in to the office for approval.

**Date of Meeting #1:** \_\_\_\_\_

**Date of Meeting #2:** \_\_\_\_\_

**Date of Meeting #3:** \_\_\_\_\_

**CHILDCARE:**

Is childcare desired for the event? \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, what ages need care: \_\_\_\_\_

How many children are expected? \_\_\_\_\_ Date Nursery Contacted: \_\_\_\_\_

Did Nursery give approval? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, the name of the Nursery Director giving approval: \_\_\_\_\_

**COMMITTEE CHAIRPERSON(S) SECTION:** This section will help with delegation. List the name(s) of the assigned person, the delegated task(s) and the deadline.

**Event Set-Up** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Event Clean-Up** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Registration** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Publicity/Marketing** Chairperson: \_\_\_\_\_  
This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Food/Refreshments** Chairperson: \_\_\_\_\_  
This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Programs** Chairperson: \_\_\_\_\_  
This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Building Use Form(s)** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Check Request Form(s)** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Printing Request Form(s)** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Special Guest/Guest Speaker Host Person** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_



**Other** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Other** Chairperson: \_\_\_\_\_

This person has been given the following task(s): \_\_\_\_\_

\_\_\_\_\_

The deadline for this task(s) is: \_\_\_\_\_

**Total Budget Needed:** \_\_\_\_\_

**Which type best describes this type of project/event:**

- |                                      |                                       |                                   |
|--------------------------------------|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> God-Centric | <input type="checkbox"/> Relationship | <input type="checkbox"/> Outreach |
| <input type="checkbox"/> Word of God | <input type="checkbox"/> Evangelistic |                                   |
| <input type="checkbox"/> Nurturing   | <input type="checkbox"/> Generosity   |                                   |

**How will this project/event embrace the vision of Mount Bethel? Plan of Action: How will this project/event's goals be achieved?** \_\_\_\_\_

\_\_\_\_\_

## **Project/Event Evaluation Form**

The purpose of this form is to evaluate your recent project or event. Use this form as a tool to review your accomplishments, challenges, opportunities, strategies, and stewardship responsibilities. Please submit a copy of this form upon completion of your project/event (within 3-5 days).

**Submitted By:** \_\_\_\_\_ **Contact #:** \_\_\_\_\_

**Ministry:** \_\_\_\_\_ **Project/Event:** \_\_\_\_\_

**Date of Project/Event:** \_\_\_\_\_ **Number of Attendees:** \_\_\_\_\_

**Overall Evaluation** (Circle One)      1 - Poor   2 - Fair   3 - Good   4 - Very Good   5 - Excellent

**Accomplishments (What went well):**

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**Challenges (What were weaknesses and items that caused tension):**

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**Opportunities (What were some ideas that could have been implemented to make it better):**

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**Strategies (What can be done in the future to minimize weaknesses and tensions)**

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**Proposed Budget:** \_\_\_\_\_ **Actual Cost:** \_\_\_\_\_ **Profit/Loss Amount:** \_\_\_\_\_

**If actual cost was more than proposed budget, why didn't you meet the budget?** \_\_\_\_\_

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