

TRINITY FUNDRAISER & NON-FUNDRAISER BOOTH REQUEST FORM

(NARTHEX, CHURCH LOBBY AND GYM LOBBY WILL NOT BE RESERVED WITHOUT PRIOR AUTHOPRIZATION)

EVENT NAME _____

DATE (S) OF EVENT _____

AREA BEING REQUESTED: NARTHEX CHURCH LOBBY GYM LOBBY

IS THIS BOOTH REQUEST RELATED TO A FUNDRAISING EVENT? YES NO

IF YES, HAS THE FUNDRAISING APPLICATION BEEN APPROVED BY THE HR & FINANCE DIRECTOR YES NO

<p style="text-align: center;">HOW MUCH TIME DO YOU NEED FOR SET-UP</p> <p style="text-align: center;"><input type="checkbox"/> ½ HOUR <input type="checkbox"/> 1 HOUR</p> <p>If you need longer than what is stated above please indicate how many hours prior to your start time.</p> <p style="text-align: center;">_____</p>	<p style="text-align: center;">WHAT TIME IS BOOTH NEEDED?</p> <p>START _____ AM/PM</p> <p>END _____ AM/PM</p>	<p style="text-align: center;">HOW MUCH TIME DO YOU NEED FOR TEAR DOWN</p> <p style="text-align: center;"><input type="checkbox"/> ½ HOUR <input type="checkbox"/> 1 HOUR</p> <p>If you need longer than what is stated above please indicate how many hours prior to your end time.</p> <p style="text-align: center;">_____</p>
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PRINT NAME _____ PHONE # _____

SIGNATURE _____ DATE _____

PLEASE NOTE:

All booth advertisement/solicitations must relate to the ministries of the congregation. It is also requested that all event booths and displays be neat, attractive and tastefully decorated (no hand written posters).

Booth Restrictions are as follows:

Gym Lobby for Journey Worship Services:

- Maximum one (1) non-fundraiser or fundraiser event booth per weekend
- Maximum two (2) event booths per month

Church Narthex

- Maximum one (1) non-fundraiser event booth per weekend

Church Information Lobby

- Maximum one (1) non-fundraiser or fundraiser event booth per weekend

OFFICE USE ONLY:

CONFIRMATION NUMBER _____ CONFIRMATION RETURNED TO APPLICANT _____

IF YOU HAVE TO CANCEL OR DISCOVER YOU NO LONGER NEED THIS AREA PLEASE NOTIFY CORI FORD SO THIS AREA CAN BE MADE AVAILABLE FOR OTHER EVENTS.

CUSTODIAL REQUEST FORM

EVENT NAME _____ SET - UP TIME _____ TEAR DOWN TIME _____

DATE (S) _____

TABLE

CHAIR

<p>OFFICE USE ONLY:</p> <p>CONFIRMED EVENT BOOTH LOCATION _____</p> <p>DIRECTOR OF OPERATIONS APPROVAL _____</p> <p>CUSTODIANS PERFORMING WORK _____</p>
