

Huber Memorial Church

Church Calendar Date Request Form

Place this form in Church Council Mailbox or email to: mrsstazz98@gmail.com

Please submit only one date per request form.

(If you have a weekend of events please submit three separate forms for Friday, Saturday and Sunday.)

Event: Proposed Event Date:
(As will appear on calendar.)

Sponsoring Ministry: Secondary Date:

Location: Huber Outside of Church _____

If inside of church, requested location(s): Hamlin Hall Kitchen Chapel Sanctuary White House

Event Time: Classrooms Other _____

Setup Time: End Time: *(Please include time for cleanup)*

Event Description:

Event requires: Church Van Bus

Proposed Attendance: *(Any event with greater than 50 attendees must request security.)*

Ministry Contact Person:

Phone Number: Cell Home ()

Email Address:

Church Council Use Only. Do not write within shaded area

Date received: Approved Not Approved

Signature: _____ Date: _____

Approval for calendar date can only be given by Council Executive Officer (Secretary, President, and/or Vice-President)