

## Calendar Scheduling Form

***Use this form to request a date be added to the master calendar. If there is a conflict on date or arrangements, you will be contacted.***

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

Name of church program organization: \_\_\_\_\_

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

Event date: \_\_\_\_\_

Day of the week (circle): S M T W T F S

Beginning time: \_\_\_\_\_ Ending time: \_\_\_\_\_

Facilities needed: \_\_\_\_\_

Number of anticipated participants: \_\_\_\_\_

Person in charge: \_\_\_\_\_

Phone: \_\_\_\_\_

### **Office Use Only:**

Date and space requested is available

Yes  No

Approved \_\_\_\_\_

Yes  No

Event placed on Master Calendar by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_