FIRST UNITED METHODIST CHURCH WINTER GARDEN

Event/Group Reservation Form

A community worshiping God, welcoming all, and serving our world

TODAY'S DATE: _____ EVENT DATE: _____

EVENT NAME _____

SPONSORING GROUP _____

CONTACT PERSON _____ PHONE _____

EMAIL _____

PERSON ON SITE FOR EVENT _____ PHONE _____

HOW DOES THIS EVENT FULFILL THE MISSION OF FUMCWG?

_____

_____

_____

HOW DOES THIS IMPACT PEOPLES' HEARTS AND MINDS AFTER THE EVENT?

_____

_____

_____

IF THIS IS A FUNDRAISER, WHAT GROUP IS THE BENEFICIARY OF THE FUNDS

_____

WHO IS YOUR TARGET AUDIENCE?

_____

EXPECTED ATTENDANCE _____

THIS EVENT IS A ☐ ONE-TIME ☐ ON-GOING _____ (ie Monthly 1st Tuesday)

IF THIS IS A RECURRING EVENT, WHAT DAYS OF THE WEEK AND ENDING DATE

M ☐ T ☐ W ☐ TH ☐ F ☐ ENDING DATE _____

START TIME _____ AM/PM END TIME _____ AM/PM

DO YOU NEED A REALM REGISTRATION EVENT ? YES ◯ NO ◯ if your answer is yes, additional information may be required

DO YOU NEED CHILDCARE FOR THIS EVENT? YES ◯ NO ◯

FACILITIES

OF ROOMS NEEDED _____ ROOMS REQUESTED _____

SET UP

OF TABLES _____ # OF CHAIRS _____ KITCHEN SUPPLIES _____

(paper goods, oven access, etc) _____

OTHER CHURCH EQUIPMENT NEEDED _____

SET UP BEGINS _____ AM/PM CLEAN UP ENDS _____ AM/PM

CLEAN UP/RESET WHO _____ WHEN _____

CONTENT AND MEDIA *Promotion Channels Needed*

SELECT ALL THAT APPLY:

☐ E-NEWSLETTER ☐ SOCIAL MEDIA ☐ BULLETIN

☐ WEBSITE ☐ SLIDESHOW ☐ MISSION & MINISTRY MOMENT

☐ PAID FOR AD ON SOCIAL MEDIA ☐ PAID FOR AD IN NEWSPAPER

BUDGET LINE OR PAYMENT INFO _____

PROMOTION START & END DATE: *When to begin and stop advertising*

START DATE _____ ENDING DATE _____ *If recurring, leave blank*

HOW OFTEN DO YOU WANT TO SHARE INFORMATION ON THIS EVENT

This is not a guarantee for the amount of posts

☐ ONE-TIME ☐ ONCE A WEEK ☐ ONCE A MONTH

SHORT DESCRIPTION: *Provide a statement using 50-100 words you want used in capturing the congregation's interest in attending/volunteering for your event*

_____

_____

_____

_____

GRAPHIC / IMAGE: *What do you want to use to draw interest to be a greater statement about your event? Attach an image to email if possible.*

_____

_____

_____

SIGNATURE _____ DATE: _____

Your Event will not be added to the calendar until this form is approved and returned via email or regular mail. Please allow a minimum of one week for approval.

FOR OFFICE USE ONLY (REVISED 10/13/26)

RECEIVED BY _____ DATE RECEIVED _____

APPROVED BY _____ DATE APPROVED _____

Rev. Melissa M. Stump, Senior Pastor

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