First Baptist Church Women's Ministry
Activity/Event Planning Information Form

Name of person making this request: _____

Contact Information: Phone #_____ Email address: _____

Proposed Activity/Event Name: _____

DATE: _____To Be Announced_____ TIME: _____

LOCATION_____

Specific Details: _____

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Committee Member's Names: _____

_____

_____

*Attach additional sheets if more room is need for additional details

_____I request a meeting with Leadership to further discuss information on this Form.

Date Form submitted_____ Given to: _____

----------**Church Use Only** ----------

Date Form Received: _____ By whom_____

Date Reviewed by Leadership: _____

Discussion: _____

_____

_____ Request Approved _____ More information Needed _____ Not Approved (at this time)

_____Pastor/other Church Leadership informed of this Request and/or Determination/Decision.

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