

Activity Request Form

For use by RCC Staff & Ministry Leaders



Original Request Revised Request

Owner/Admin: _____	Phone #: _____
Today's Date: ____/____/____	Email: _____
Department: _____	Notes: _____

BASIC EVENT DETAILS	Location: LAF WL ESP ATT ONLINE
Event Name: _____	Recurring Dates: _____
Event Date(s): _____	Excluded Dates: _____
Event Time: _____ to _____ am/pm	Budget: <input type="checkbox"/> In Budget <input type="checkbox"/> Not in Budget
Description: _____ _____	
Core Value of Event: <input type="checkbox"/> Know God <input type="checkbox"/> Find Freedom <input type="checkbox"/> Discover Purpose <input type="checkbox"/> Make Waves	

ROOM REQUEST
<input type="checkbox"/> Auditorium <input type="checkbox"/> Fellowship Hall <input type="checkbox"/> Theater
<input type="checkbox"/> Lobby <input type="checkbox"/> Kitchen (FH) <input type="checkbox"/> Arcade
<input type="checkbox"/> Loft <input type="checkbox"/> Gym <input type="checkbox"/> Nursery/Pre-K Room #s _____
<input type="checkbox"/> Conference Rm <input type="checkbox"/> Kitchen (gym) <input type="checkbox"/> Kids' Min Room #s _____
<input type="checkbox"/> LG Room #s _____ <input type="checkbox"/> Other: _____
Set up/Tear down: _____ to _____ am/pm

SETUP	EQUIPMENT	Details: (Include diagram if applicable)
<input type="checkbox"/> Default Setup	<input type="checkbox"/> ____ handheld mics	
<input type="checkbox"/> ____ 6ft w/ ____ chairs/ea	<input type="checkbox"/> Passport/Portable audio	
<input type="checkbox"/> ____ 8ft w/ ____ chairs/ea.	<input type="checkbox"/> Video/screen	
<input type="checkbox"/> ____ round w/ ____ chairs/ea.	<input type="checkbox"/> sound/tech person from _____ to _____ am/pm	
<input type="checkbox"/> ____ extra trash cans	<input type="checkbox"/> Other _____	
<input type="checkbox"/> black table cloths		

OFF SITE ACTIVITY
Address: _____
Travel Time: _____ to _____ AM/PM
<input type="checkbox"/> Bus (32) - CDL req. <input type="checkbox"/> Personal Vehicle(s)
<input type="checkbox"/> Short Bus (16) - CDL rec.
Driver(s): _____
Driver app(s) on file: YES / NO

ARF TEAM USE ONLY
Date Received: ____/____/____
____ Pastor Adam Approval
____ Connie Approval
Entered in CCB: ____/____/____

*Do not advertise details before approval. Childcare must be arranged by event owner.
**Clean-up, tear-down, and trash removal are the responsibility of the event owner.
***Driver app still needed for personal vehicle