



NEW LIFE EVANGELISTIC CENTER - EVENT/MEETING REQUEST FORM

Email Event/Meeting Requests to: EventPlanningNLEC@gmail.com

To ensure events, meetings, and programs are well organized, completed timely, presented in a professional manner, and aligned to NLEC's doctrine and standards when communicated internally (to church members and affiliate churches) and externally (to the community and general public), please complete this form in its entirety and submit it well in advance of your planned event.

General Event/Meeting Information:

Submission Date:	
Event/Meeting Title:	
Proposed Event/Meeting Date & Time:	
Alternate Date & Time:	
Contact Name & Number:	
Email Address:	
Auxiliary Leader:	
Auxiliary Leader's Approval Signature:	
Auxiliary Pastor's Approval Signature:	



Event/Meeting Description or Outline: _____

Event/Meeting Location: Off-Campus Off-Campus Location: _____

On Campus: Classroom Sanctuary Hospitality Room Eagles Nest Other: _____

Assistance from the following auxiliaries is needed (please select all that apply):

- Choir Greeters Public Relations Sound booth Ushers
- Culinary Photographer Security Transportation Volunteers

Do you require a table in the foyer to promote your event? Yes No

If yes, how many? _____ What dates will you need table(s)? _____

