

# Greater Shiloh Church



## Event Needs Request Procedure

1. The **Event Needs Request** form should be used to ensure the facility requested is properly prepared for your specific needs.
  - a) Requests are subject to approval/rejection based upon the discretion of the Administrative office.
2. Event Needs requests should be submitted even after the Ministry Event has *already* been approved for a calendar date.
3. Submit your event request 6-8 weeks prior to your upcoming event.
4. The GSC calendar is finalized in the late fall for the upcoming year.
  - o These dates are locked in.
  - o **Cancellations** should be sent to [adminsupport@gshiloh.com](mailto:adminsupport@gshiloh.com)
5. Copies of GSC calendar are available on the phone app and GSC website.

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6. Requests can also be submitted to request an '*addition*' to the calendar after it has been completed and closed.
  - a) The Administrative Office will review and make sure that the event does not conflict with other events, holidays or other engagements in any way.
  - b) Requests will be approved or denied at the discretion of Senior Pastor and the Administrative Staff.
  - c) Ministry Head will be contacted once a decision has been reached.

**Please keep this top form for your records. Return the second page to the admin support mailbox.**

**Thank you!**

Date Submitted: \_\_\_/\_\_\_/\_\_\_

Date Requested: \_\_\_/\_\_\_/\_\_\_

*\*\*\*Every day is a day to be wholeheartedly engaged in the ministry of the Lord\*\*\**

Revision – 8/1/2017

# Greater Shiloh Church (Main Campus)

## Event Space Needs Request

Date Submitted \_\_\_\_\_ Already on the church calendar Y  N

Event Title \_\_\_\_\_ (Name to be listed on Public Calendar)

Requestor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Name of Sponsoring Ministry \_\_\_\_\_

Day and Date of Event \_\_\_\_\_

Actual Start Time \_\_\_\_\_ Actual End Time \_\_\_\_\_

Estimated Number of anticipated attendees \_\_\_\_\_

### Type of Event

Prayer Vigil  Workshop/Seminar  Panel Discussion   
Conference  Breakfast  Luncheon   
Wedding  Wedding Rehearsal  Reception   
Other  Please Specify \_\_\_\_\_

### FACILITY REQUESTED

<b>GSC Main Building</b> <input type="checkbox"/>	<b>Shiloh Chapel</b> <input type="checkbox"/>	<b>Enrichment Center</b> <input type="checkbox"/>
<b>Room</b>	<b>Room</b>	<b>Room</b>
Sanctuary <input type="checkbox"/>	Sanctuary <input type="checkbox"/>	Banquet Hall <input type="checkbox"/>
Alpha & Omega <input type="checkbox"/>	Fellowship Hall <input type="checkbox"/>	
First & Last <input type="checkbox"/>	Blue Room <input type="checkbox"/>	
Foundation Room <input type="checkbox"/>	Outside Area <input type="checkbox"/>	
Outside Area <input type="checkbox"/>		

**\*\*Need Security Staff for Opening of Building**  Yes  No

**Need Building Opened at:** \_\_\_\_\_ am/pm

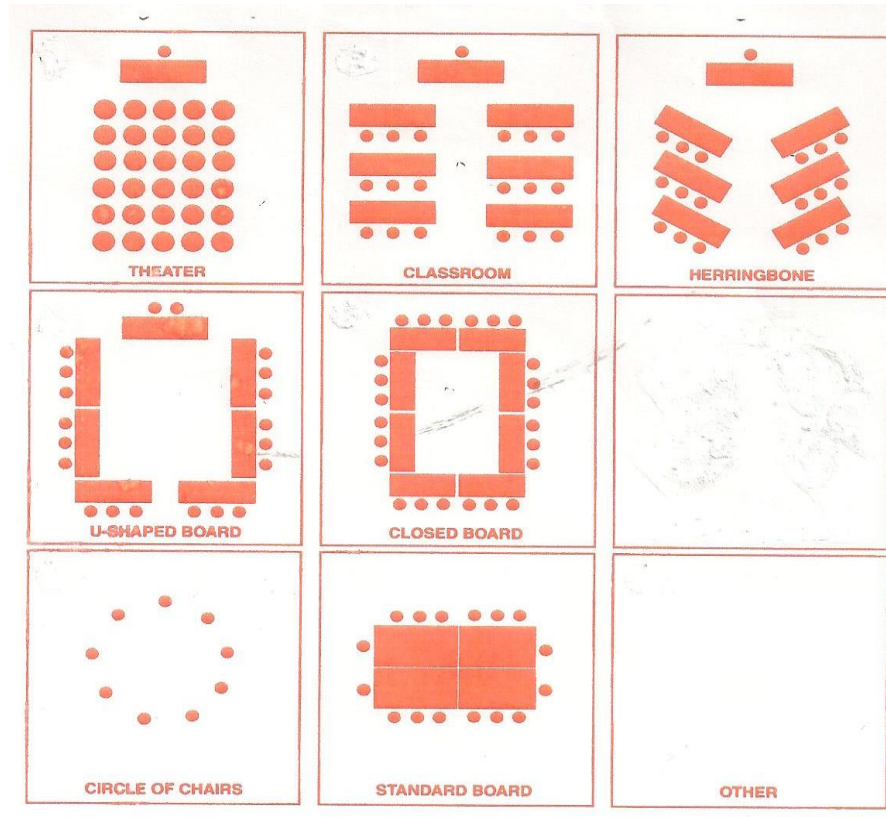
### Room and Table Set-up

- Special setups can be done in the Alpha & Omega A & B or Wings Like Eagles A & B.
- Special arrangements must be noted on this document, which should be submitted no less than two weeks in advance. See diagram on the reverse of this document and check appropriate set-up requirement. These setups are noted with the maximum capacity of attendees.

**\*\*\*See reverse page for room set up information\*\*\***

## Table Set-up Styles

- Theater style (75-80 max)
- Herringbone (55 max)
- Closed Board (30 max)
- Standard Board (20 max)
- Classroom Style (55 max)
- U-Shaped Board (30 max)
- Circle of Chairs



**This is only a sample of how rooms may be set up. It is subject to change according to the size of room and number of seats required. Please be prepared to discuss additional capacity with Temple Maintenance Crew.**

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## **PRESENTATION EQUIPMENT AND ACCESSORIES**

- Dry erase markers for white board
- Podium
- Flipchart
- Power Point Projector
- Standing Easel
- Pointer

# Greater Shiloh Church Main Campus

## Event Checklist

The completion of this Event Checklist is to help facilitate any programs, concerts or events held on the Greater Shiloh Campus (including the Greater Shiloh, Shiloh Chapel or the Enrichment Center) that requires the presence of any of the ministries listed below.

The purpose is to give each ministry head a reasonable amount of time to prepare staffing and supplies to cover the needs that the event may require. This checklist will also help to ensure the success of your endeavor and keep order in the house of God.

### STEP #1 Complete the following information

Host Ministry	
Name & Contact Number	
Name of Event	
Date Requested	
Location(s) Requested	

Once the Ministry has received confirmation of availability for their event, the ministry head should proceed with the following checklist.

### STEP #2

Contact the following ministry heads via individual ministry forms or memorandums and indicate the date you have physically spoken with each ministry head that will be involved with the production, affiliation or clean up of your event.

\_\_\_\_\_ Multimedia Ministry: (Sound/Video).....Mike Purvis (Ministry Form)

\_\_\_\_\_ Director of Music: (Musicians)..... Corey Brown (Attached Memo Form)

\_\_\_\_\_ Gatekeepers: (Security).....Deacon Arthur Dabney (Ministry Form)

\_\_\_\_\_ Temple Servant: (Ushers).... Wesley Holmes and Althea Mitchell (Attached Memo Form)

\_\_\_\_\_ First Fruits Ministry: (Food).....Mother Naomi Staton (Ministry Form)

\_\_\_\_\_ Temple Cleaning Crew (Maintenance)...Deacon Tony Brown (Ministry Form)

\_\_\_\_\_ Cordials: (Greeters).....Linda Steverson (Attached Memo Form)

\_\_\_\_\_ Security Staff.....Henry Cooper (Attached Memo Form)

# MINISTRY OF HELPS (Main & North Campus)

## MEMORANDUM

TO: \_\_\_\_\_ (Name of Ministry Head)

FROM: \_\_\_\_\_ (Host Ministry Name)

DATE: \_\_\_\_\_

EVENT TITLE: \_\_\_\_\_

This is to request the services of the \_\_\_\_\_ Ministry for the above mentioned event on (date) \_\_\_\_\_. The \_\_\_\_\_ Event will take place at the \_\_\_\_\_.

The start time will be \_\_\_\_\_ AM/PM and the event will end at \_\_\_\_\_ AM/PM.

We will need the \_\_\_\_\_ Ministry to assist us in the following ways:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Please contact me at:

Phone \_\_\_\_\_ Email \_\_\_\_\_ Other \_\_\_\_\_

We look forward to working with the \_\_\_\_\_ Ministry to help make the \_\_\_\_\_ event a tremendous success.

Thank you in advance for your assistance.

Name \_\_\_\_\_

Ministry \_\_\_\_\_