# VICTORY LUTHERAN CHURCH - EVENT REQUEST FORM 

Approved by ___ Date ___ (Victory Staff Only)
Name of Event $\qquad$ Day of Week $\qquad$
Event Purpose $\qquad$ Expected Attendance $\qquad$

Date(s) of Event $\qquad$
$\qquad$
$\qquad$ Bi-Weekly ___ Monthly
$\qquad$ One Time ___ Multiple Dates $\qquad$ Weekly for $\qquad$ weeks

Start Time $\qquad$ End Time $\qquad$ Event Location $\qquad$ 1st Choice

Setup Date $\qquad$ Setup Time $\qquad$ Event Location $\qquad$ 2nd Choice

Event Contact Person $\qquad$ Church Contact Person $\qquad$
Contact Phone Number $\qquad$ Church Contact Phone Number $\qquad$

## HOW WOULD YOU LIKE TO PUBLICIZE YOUR EVENT? (2 week notice must be given)

$\qquad$ Weekly Email $\qquad$ Website $\qquad$ Slide $\qquad$ Poster $\qquad$ Banner $\qquad$ Newsletter for the month of: $\qquad$ Which two weeks for display/sign-ups in Lobby? 1st week $\qquad$ 2nd week $\qquad$

FACILITIES AND CUSTODIAL SUPPORT (*4 week notice must be given)
$\qquad$ Custodian Required*
Room Setup Required*
Custodial Cleanup Required*
$\qquad$ Coffee $\qquad$ Decaf $\qquad$ Water
Other $\qquad$
Other Equipment Needed: $\qquad$ TV Remote $\qquad$ DVD Remote $\qquad$ White Board $\qquad$ Easel $\qquad$ Lectern Other: $\qquad$

A/V SUPPORT (2 week notice must be given)
$\qquad$ HDMI Cable $\qquad$ Portable Microphone $\qquad$ ProPresenter Slides $\qquad$ Zoom Call Setup Livestream/Recorded $\qquad$ Guest Speaker/Presentation/Musician Name: $\qquad$ Phone: $\qquad$ Email: $\qquad$
${ }^{* * *}$ Choosing these options may require an $A / V$ Tech to be present and a fee may apply. If $\mathrm{A} / \mathrm{V}$ support is needed, contact Gio Begano for consultation. 480-830-5024 xt. 119 / gbegano@victorylutheran.com.

Please provide detailed information for the room setup. INCLUDE a drawing with this form if possible. Room diagrams available upon request.
Additional Details: $\qquad$

