# Ministry Activity / Program Request Checklist

\*\*\*Please utilize this checklist to allow the Church Administrative Office to better serve the ministry.\*\*\*

This checklist must be completed and submitted to the office ***at least*** **1 MONTH PRIOR** to your Activity / Program.

**All requests are subject to approval must support TCOLCC’s Mission & Vision and are subject to approval or denial by Pastor Middleton or his designated leadership authority.**

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| **Ministry Name:**  | **Today’s Date:11/18/2022**  |
| **Ministry Leader:**  |
| **Activity / Program Name:** |
| **Event Date:** | **Event Time:** | **Set Up & End Times:** |
| **Purpose or Objective of Activity:** |
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| **LOCATION OF ACTIVITY:** (Check One) \_\_\_\_\_\_ TCOLCC \_\_\_\_\_\_\_\_ Outside Location |
| If outside of TCOLCC, please provide Name & Address of location: |
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| **Administration Support Requirements**  |
| Has Pastor / Ministry Development Team Approved of Activity / Program?  | (Circle One) YES NO  |
| Designated Ministry Development Team Leader: |  |
| Has the Church Administration been contacted regarding the details of this Activity / Program?* Has the Activity / Program been added to the church calendar?
 | (Circle One) YES NO (Circle One) YES NO  |
| Is a Guest Speaker required?* Has the Guest Speaker been approved by Pastor Middleton?
* Has an invitation letter been requested from the church adr1inistration office to be sent to the Guest Speaker? *(Office Use Only)*
 | (Circle One) YES NO N/A(Circle One) YES NO N/A(Circle One) YES NO N/A |
| Has a budget / honorarium been requested / submitted to the Director of Operations? (Budget info **MUST** be emailed at least **4 weeks prior** to Activity / Program.)* Will any up-front monetary funding be needed from the church office?
* If yes to either question, the Ministry Leader **MUST** contact the administration office and make an appointment for budget review. *\*Cash is not kept on hand. Reimbursement Check Request Forms are found near the copy machine outside the Deacon’s Office and can be submitted after activity, if necessary.*
 | Circle One) YES NO N/A(Circle One) YES NO N/A |
| Will you or anyone from your team need a Tax-Exempt letter to purchase items for the Activity / Program?Name of person shopping: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (Circle One) YES NO N/A |
| Does the Activity / Program require a wrap up meeting?* If yes, please contact the church administration office to schedule a meeting date.
* Wrap Up meeting time & location: (Office Use Only) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 | (Circle One) YES NO N/ADate of Wrap Up: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Service / Ministry Support Requirements** |
| **AUDIO / SOUND / VIDEO**Will the Audio / Sound / Video Team be needed to run tech equipment? * If your activity requires specific technical needs, **please contact the Audio / Sound Ministry Directors** at least **3 weeks prior** to Activity / Program to discuss specific instructions. *(Please see Deacon Lee James or Brother Bryan Lee)*

Will Activity / Program need streaming? | (Circle One) YES NO N/A(Circle One) YES NO N/A |
| **COMMUNICATIONS**Will an announcement or flyer be needed prior to the Activity / Program? * If **yes**, **please contact the Communications Director at least 3 weeks prior** to Activity / Program to discuss specific details. – ***Sis. Marquetta Hamell*** ***lanebrownm@icloud.com***
* Will the activity / program flyer need to be placed on the Church’s Website?
 | (Circle One) YES NO N/A# of Flyers Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_(Circle One) YES NO N/A |
| Will any printed materials be needed for the Activity / Program?* If **yes**, **please contact the Church Administration Office at least 3 weeks prior** to Activity / Program to discuss specific details.
 | (Circle One) YES NO N/ADate Prints Needed:\_\_\_\_\_\_\_\_\_\_\_\_\_#of Prints Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **MAINTENANCE**What space will be needed for the Activity / Program?\_\_\_\_\_\_\_\_\_\_Sanctuary \_\_\_\_\_\_\_\_\_\_Classroom*\*\*\*Use of the Sanctuary may requires specific approval. Room availability must be verified by Church Administration by review of Church Calendar.* | Classroom Assigned:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Office Use Only)* |
| Will event require special detail cleaning or preparation by the maintenance department prior to the Activity / Program? * If yes, the request **MUST** be made at least **4 weeks prior** to Activity / Program by email to the administration office for verification and completion.
 | (Circle One) YES NO N/ADate Cleaning Needed:\_\_\_\_\_\_\_\_\_\_\_*(Office Use Only)* |
| * Will the Activity / Program need specific chair & table set up?
* If yes, please provide: How many people are expected?\_\_\_\_\_\_\_\_\_\_
* How many tables are requested? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 | (Circle One) YES NO N/ASet Up by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Office Use Only)* |
| Each Ministry is responsible for clean-up of their Activity, Event or Program.* Has a “Clean Up Team” been established?
 | (Circle One) YES NO N/A |
| **DECOR**Will decorations be needed?* If **yes**, **please contact the Church Administration Office at least 3 weeks prior** to Activity /Program to discuss specific details.
 | (Circle One) YES NO N/ADate Decorations Needed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **For Office Use Only – Other Ministry Support / Contact Needed** |
| **Deacon** on Duty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Will **Securit**y be needed? (Circle One) YES NO  |
| Fine Arts – Music /Drama / Dance  | City Café / Hospitality  | Men’s / Women’s Ministries | Marriage / SinglesMinistries  | Generations Ministries | Evangelism / Community Care |
| ***Notes:*** |
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