

	ontact Name:	
Co	ontact Phone:	
Co	ontact Email:	
Date:		
staf	Please forward this completed proposal to Laura Van Ham, Ministries Coordinator, for review by the pastor and staff. Following taff consideration, this proposal may also be reviewed by the Parish Pastoral Council. You will be notified of the results within alays. For more information, contact Laura at	



Event Proposal

Event Name:	
	Start Time: End Time:
	Set-Up Start Time: Clean-Up End Time:
*	Estimated # of attendees:
*	Proposed Parish Room/Resource:
*	Is food being served? ☐ Yes ☐ No
	O If yes, cooked on site or catered?
	If catered, name of company:
	Name of Attending Certified Kitchen Specialist:
*	Budget (Use a separate sheet, if needed):
Ť	 Revenue (Sources and estimated dollars generated from ticket sales, program advertising, etc.)
	o Expenses (Advertising, printing, purchases, rentals, professional services, refreshments, etc.)
•	Volunteers (Use a separate sheet, if needed)
	o # Needed:
	o General Description of Duties (Soliciting, event preparation, set up, day of event, clean-up, etc.):
	Will your ministry/group provide the volunteers or will help be solicited from the parish?
	OFFICE USE ONLY
F	Reviewer's Questions:
-	
5	Staff Review Date: Approved:YesNo
	(Reviewer's Initials)
	PPC Review Date: Approved:YesNo(Reviewer's Initials)