



EVENT PLANNING FORM: STEP 1

CREATE YOUR PROGRAM

Instructions: As the first step of the events planning process, please complete **Step 1** of the Events Packet. Upon approval of your event program, you can begin working on **Step 2** of the Event Budget Request Form. **Please note that you should not move forward with completing Step 2 until your proposed program has been approved.** Ideally, it is good to submit this form and the proposed program at least **3 months prior to your event launch date.** Submit the completed form and program to the Events Department via email at events@harvestlifechangers.com. Hard copies can be submitted to the Ministry Admin Box in Room 300.

YOUR INFORMATION:

Name:

Contact #:

Email:

EVENT INFORMATION:

Event Title:

Event Date(s):

Event Time:

Theme:

DEVELOP EVENT GOALS:

Determine what you want to achieve through this event by listing your goals below. We are expecting you to accomplish the goals you list for your event.

1. Attendance Goal:

Please take note of the following maximum capacities when setting your attendance goals

Room	Room Setup	Maximum Capacity
Sanctuary	Standard	850 people
MPC	Round tables with 6 chairs at each table	216 people
MPC	Theater Style	300 people
Room 200	Rows of chairs (with no table in the back)	96 people

2. Financial Goal (If applicable):

3. Sponsorships (if applicable):

4. Other Goals (if applicable):

CREATE A PROGRAM:

Create an event program – What do you see happening on the day of your event from start to finish?

- **Examples of elements that may be in your program:** Welcome, icebreaker, praise and worship, dinner is served, Word of God (speaker), artist, special performances, watch a movie, etc.
- **Proposing Program Participants:** If you know the name of individuals you would like to be on the program you may include it in your program (i.e., John Doe will do the welcome). However, if you do not have those names, you can still submit the program.
- **Notifying Participants:** Please **do not** notify the individuals on your proposed program until you have received approval. Upon approval of your program, you may ask for the person if they are available and interested in being on your program.

Please sign and date below and submit the completed form to the Events Department via email to events@harvestlifechangers.com. Hard copies can be submitted to the Ministry Admin Box in Room 300.

Thank you in advance for your labor of love and your dedication to make this event a success!

Event Lead: Signature: _____ Date: _____

Ministry Director: Signature: _____ Date: _____
(If applicable)

EVENTS DEPARTMENT ONLY

Executive Event Director: Date Received: _____ Initial: _____ Date Forwarded: _____