The Higher Way Church - Jones Memorial

MINISTRY CALENDAR EVENTS FORM

Events listed below will be added to the church calendar upon approval. Ministries should plan early! All events must be scheduled 45 days prior.

MINISTRY: _____ **DATE SUBMITTED:** _____

CHAIRPERSON/LAY LEADER(S): _____

DAYTIME PHONE: _____ **EMAIL ADDRESS:** _____

NOTES: _____

DATE WITH YEAR	DAY OF WEEK	TIME	BRIEF DESCRIPTION OF EVENT	LOCATION

FOR OFFICE USE ONLY

DATE RECEIVED: _____ ☐ Approved ☐ Denied ☐ Cancelled

COMMENTS: _____

APPROVED BY: _____ **DATE APPROVED:** _____