



MINISTRY PROPOSED ACTIVITY FORM

This form shall be completed for every event that you desire to schedule for the upcoming fiscal year

Ministry Name _____

Name of Activity _____

Activity Number _____

Date(s) of Activity: _____
If recurring activity, please state the months and day of the month

Number of Participants Expected: _____

BUDGET

Please break down the total cost by identifying each individual category and the amount.

Category	Description	Amount
Audio/Visual <i>(mics, projectors, internet, etc.)</i>		
Decor Vendors <i>(accent lighting, flowers, etc.)</i>		
Entertainment <i>(musician, honorarium, speaker fees, rider, etc.)</i>		
Event Rentals <i>(linens, tents, stage, etc.)</i>		
Food & Catering		
Marketing & Registration <i>(print/design, flyers, registration, etc.)</i>		
Supplies		
Training <i>(facilitator fees, meals)</i>		
Travel/Accommodations <i>(airfare, ground transportation, lodging, meals, etc.)</i>		
Venue Costs <i>(venue rental, security deposit, insurance, parking, etc.)</i>		
Other:		
Other:		
What is the total cost of the entire event? <i>(attach official documentation, quotes and Ministry Funds Request(s) to support total cost)</i>		

Are there any sponsors or donations for the event? If so, please list the sponsor, their contribution and what they are asking for in return. Include this amount on the PROPOSED BUDGET SUMMARY in the TOTAL ANTICIPATED REVENUE COLUMN for this activity.

Explain the ministry mission/vision that will be accomplished through this activity