PARISH MINISTRY EVENT
AUTHORIZATION FORM

Please submit this form to the parish office before advertising.
Facility request forms must be submitted 2 weeks prior to your event.
Parish Ministry Event Authorization Form must be approved first before scheduling is done.

1. EVENT AND MINISTRY INFORMATION

Event title: _____

Sponsoring ministry: _____

Event coordinator: _____

Phone: _____ Email: _____

Event date: _____ Day of week: _____

Event start time: _____ Event end time: _____

Setup begins: _____ Cleanup ends: _____

2. EVENT PURPOSE AND DESCRIPTION

Briefly describe the event, its purpose, and planned activities:

_____

_____

3. MINISTRY COORDINATOR ACKNOWLEDGMENT

I understand that this request is not approved until signed by the pastor or administrator. I agree to follow parish policies, safeguard parish property, provide appropriate supervision, and leave all areas clean and secure. I will promptly report any incident, damage, or change to the approved event plan to the parish office.

Coordinator signature: _____ Date: _____

4. PASTOR / ADMINISTRATOR DECISION - OFFICE USE ONLY

☐ Approved as submitted ☐ Approved with conditions ☐ Not approved

Conditions, comments, or follow-up required:

_____

_____

Pastor/administrator name (print): _____

Signature: _____ Date: _____

Parish calendar entered by: _____ Date: _____

PARISH OFFICE NOTES

Copies/notifications sent to: _____