



# ST. STEPHEN BAPTIST CHURCH

5757 Temple Hill Road ♦ Temple Hills, MD 20748

301-899-8885 | [www.ssbcmd.org](http://www.ssbcmd.org)

Bishop Lanier C. Twyman, Sr.  
Senior Pastor

## 2024 EVENT/FACILITY REQUEST FORM

Requesting Ministry: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Service/Event: \_\_\_\_\_

Requested Date(s) of Service (at least 3 choices): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

### Facility Needed:

- Sanctuary    Fellowship Hall\*    Burch Chapel    Zoom    Other: \_\_\_\_\_

\*Attach room arrangement instructions/floor plan. Including special seating arrangements/placements.

This packet must be completed and submitted to the Protocol Ministry via e-mail ([ProtocolAdmin@ssbcmd.org](mailto:ProtocolAdmin@ssbcmd.org)) at least 45 days in advance of requested service/event date.



# EVENT OVERVIEW

<b>Event Audience:</b>
<b>Event Purpose:</b>
<b>Event Objectives:</b>
1.
2.
3.
<b>How does this event fit our overall Church vision/goal?</b>
<b>With what ministry(s) can you partner with to make this event more effective?</b>



# EVENT BUDGET REQUEST

**{NOTE: Funds Request Form must be submitted to Trustee Ministry}**

ACTIONS	BUDGET	REVENUE
<p><b>I. Budget</b></p> <p><b>1. Amount budgeted for this service/event</b>            Is a contract needed? * <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p><b>2. Revenue anticipated</b>            (1) Fees            (2) Offering            (3) Sales            (4) _____</p> <p><b>3. Expenses</b> (guest honorarium, food, lodging, transportation, materials, printing, etc.)</p> <p><b>4. Proposed Speaker(s)/Special Guest(s):</b>            (1) _____            (2) _____            (3) _____            (4) _____</p> <p><b>II. Promotion Plans</b> (postcard, letter, newsletter, bulletin, website, newspaper, radio, etc.)            (1) _____            (2) _____            (3) _____            (4) _____</p> <p>*All contracts must be reviewed and signed by an authorized Trustee.</p>		
<p style="text-align: center;"><b>FOR TRUSTEE USE:</b></p> <p>Ministry Account Number _____</p> <p>Total amount budgeted    \$ _____</p> <p>Total revenues                \$ _____</p> <p>Total expenses                \$ _____</p> <p>Excess (Deficit)                \$ _____</p>	<p style="text-align: center;"><b>TRUSTEE APPROVAL:</b></p> <p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">_____ Date</p>	



# MINISTRY SERVICE REQUEST

Ministry Service(s) requested:

	MINISTRY	DATE(S)	TIME	SERVICES NEEDED
<input type="checkbox"/>	Administration			
<input type="checkbox"/>	Armorbearer			
<input type="checkbox"/>	Culinary			
<input type="checkbox"/>	Dance			
<input type="checkbox"/>	Deacon/Deaconess			
<input type="checkbox"/>	Divine Hands			
<input type="checkbox"/>	Emergency Assessment Unit (Nurses)			
<input type="checkbox"/>	Hospitality			
<input type="checkbox"/>	Media			
<input type="checkbox"/>	King's Men			
<input type="checkbox"/>	Ministerial Alliance			
<input type="checkbox"/>	Music			
<input type="checkbox"/>	<input type="checkbox"/> Choir <input type="checkbox"/> Musicians			
<input type="checkbox"/>	Photography			
<input type="checkbox"/>	Praise & Worship			
<input type="checkbox"/>	Protocol			
<input type="checkbox"/>	Security			
<input type="checkbox"/>	Transportation			
<input type="checkbox"/>	Trustee			
<input type="checkbox"/>	Ushers (please specify)			
<input type="checkbox"/>	Women			
<input type="checkbox"/>	IMPACT Youth			
<input type="checkbox"/>	Other:			

<b>Additional Comments:</b>



# EVENT DEBRIEF

(for ministry use only)

<b>1. The Objectives that were met and how:</b>
<b>2. The target audience that was reached (who came):</b>
<b>3. What went well?</b>
<b>4. What was not as good as we had hoped?</b>
<b>5. What do we repeat/not repeat?</b>
<b>6. What needs to be done now to maximize our gain?</b>
<b>7. Is this event worth repeating (effort/resources spent vs. outcome)?</b>
<b>8. If the event is to be repeated, when will it be scheduled for next year?</b>



# EVENT CHECKLIST

(for ministry use only)

INITIAL CONTACT WITH ADMINISTRATIONS & PROTOCOL MINISTRIES	DONE
<ul style="list-style-type: none"> <li>• Confirm the dates for the service</li> <li>• Agree upon room set</li> <li>• Clarify equipment needs</li> <li>• Clarify food needs</li> <li>• Agree upon costs (if any)</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>STAFFING</b> <ul style="list-style-type: none"> <li>• Finalize schedule for service</li> <li>• Prepare/delegate staff assignments</li> <li>• Select and invite guest preachers, ministries, etc.</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>PUBLICITY*</b> <ul style="list-style-type: none"> <li>• Prepare letter/brochure and signage</li> <li>• Arrange to send the mailing prior to service</li> <li>• Inform staff to invite ministers &amp; others they know who should attend</li> <li>• Announce service</li> <li>• Place service on church web site</li> </ul> <p><i>*Must be approved by Protocol prior to printing.</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>FACILITY PREPARATION</b> <ul style="list-style-type: none"> <li>• Sanctuary</li> <li>• Burch Chapel</li> <li>• Fellowship Hall</li> <li>• Kitchen</li> <li>• Room (#_____)</li> <li>• Other</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>EQUIPMENT PREPARATION</b> <ul style="list-style-type: none"> <li>• Audio-Visual needs (mics, audio recording, video)</li> <li>• Podium</li> <li>• Chairs</li> <li>• Tables</li> <li>• Registration Area</li> <li>• Name Tags</li> <li>• Pens</li> <li>• Other</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

<b>FOOD PREPARATION</b> <ul style="list-style-type: none"> <li>• Table and chairs for meal</li> <li>• Coffee, hot water, tea, cream &amp; sugar, etc.</li> <li>• Extension cords</li> <li>• Trash containers</li> <li>• Table decorations</li> <li>• Dishes, silverware, napkins</li> <li>• Caterer</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>PROGRAM PREPARATION</b> <ul style="list-style-type: none"> <li>• Worship Leader selected/approved</li> <li>• Special music selected</li> <li>• Special announcements determined</li> <li>• Persons involved informed of responsibility</li> <li>• Time limitations discussed with all participants</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>FOLLOW UP</b> <ul style="list-style-type: none"> <li>• Special Thank You notes written</li> <li>• Budget/Expenses completed</li> <li>• Special commitments and promises followed up</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

<b>Additional Comments/Notes:</b>