

COMPLETE AND SUBMIT TO THE CALENDAR COORDINATOR:

TODAY'S DATE: _____

Liz Linger at llinger@trinitywoodlands.org

- Yellow Sheets are due by October 1 for the next year.
- Ministries must fill out a Yellow Sheet each year for their meetings or events.

“THE YELLOW SHEET”

REQUEST TO SCHEDULE A MEETING OR FUNCTION AT TRINITY EPISCOPAL CHURCH

Brief Description of Function: _____

Ministry/Group Sponsoring Function: _____
(For community groups, weddings and funerals Melanie Sheffield at mshffield@trinitywoodlands.org will be your contact. This Yellow Sheet will be passed on to her.)

Person(s) Coordinating Function: **Name, Phone and Email are required in order to complete reservation.**

Name: _____

Phone: _____

Email: _____

If this is a “**One Time**” Event: Date of Function: _____ Day of Week: _____

Set up Time: _____ Starting Time: _____ Time of Completion: _____

If this is a Fundraiser, has it been approved by the Vestry: Yes _____ No _____

Note: All fundraisers of any variety must be approved by the vestry prior to the event

If this event entails inviting a speaker from outside the parish,
have you gotten approval from the rector to invite him or her? Yes _____ No _____

If this is a “**Recurring**” Event: Is it Weekly: _____ Monthly: _____ or Other: _____

What day(s) of the week or the month: _____

Start up Date: _____ Completion Date: _____

Set up Time: _____ Starting Time: _____ Time of Completion: _____

Dates **NOT** Meeting Due to Holidays, Conflicts, etc.: _____

Room(s) Needed: _____

Number of Tables and Chairs Needed: _____

Special Equipment Needed*:

Television/VCR: _____ Sound Equipment: _____

***There might be an extra charge when you use our Sound System and/or Personnel.**

Musical Instruments: _____ Other: _____

Number of Expected Participants: Adults: _____ Youth (11-18yrs.): _____ Children (4-10yrs.): _____

Is Child Care Needed?: Yes: _____ No: _____

No. of Children: 0 - 12 mos.: _____ 2yrs. - 3yrs.: _____ 4yrs. - 6yrs.: _____ 7yrs. - 10yrs.: _____

NOTE: If child care is needed, a Childcare Reservation Form listing names of parents, and the names and age of children must be submitted to Amanda Boling, Kids Corner Coordinator at least one month before the event at aboling@trinitywoodlands.org.

Advertising Your Event:

Weekly Tidings: _____ Social Media: _____ Flyer: _____

Do you plan to put up an exterior sign / banner: Yes _____ No _____

Note: Flyers, Exterior Signs & Banners must be approved by the Communications Committee, please contact Megan McCreedy at mmccreedy@trinitywoodlands.org.

Person Responsible for Set Up: Name: _____ Phone: _____

Person Responsible for Take Down & Clean Up: Name: _____ Phone: _____

If after church hours: Person who will open and lock up:

Name: _____ Phone: _____

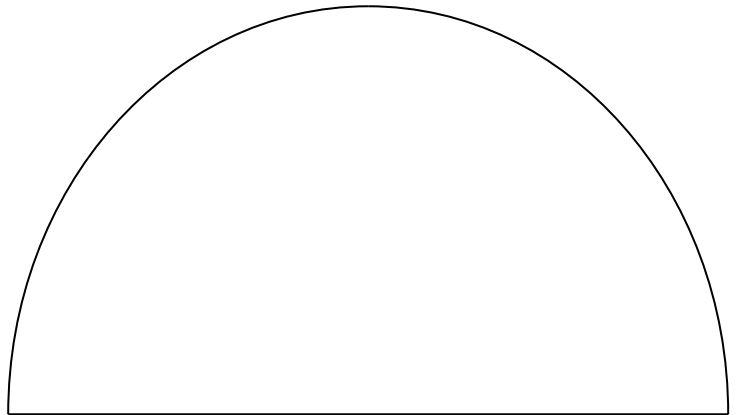
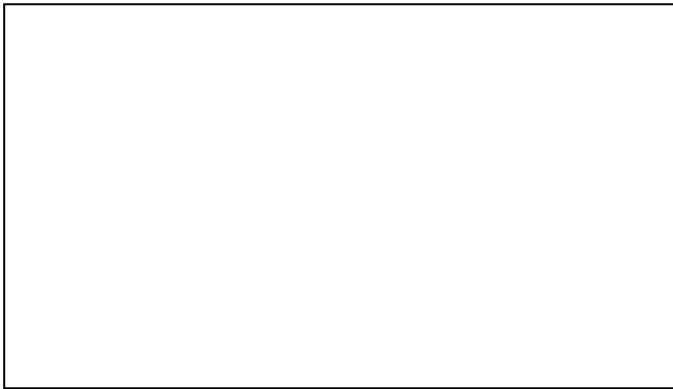
If Food Being Prepared on the Premises? Yes: _____ No: _____

Person Responsible for Kitchen Clean Up: Name: _____

Phone: _____

NOTE: Before date of function person coordinating function should review Trinity's "Guidelines for Use of Facility" (a copy of which may be obtained from the church office) THANK YOU!!!

Please sketch or write in below the set-up needed for the room(s) requested. Show door locations.



Coordinate all changes for your function or special event through Liz Linger at llinger@trinitywoodlands.org.

Note: A minimum of 72 hour notice must be given to Liz Linger at llinger@trinitywoodlands.org for any changes in the set-up, otherwise Trinity might not be able to accomplish those changes

FOR OFFICE USE ONLY!!!

Key Issued: _____ Date _____ Key Returned _____

Non Profit: Yes _____ No _____ Fee: _____

Notes: _____

On ACS? Yes _____ No _____

