



Garden Grove Seventh-day Adventist Church

Event Request Form

Ministry _____ Today's Date _____

Ministry Leader Requesting Event _____

Email _____ Phone _____

Event's Preferred Date _____ Event's Alternate Date _____

Beginning Hour of Event _____ Ending Hour of Event _____

Beginning Hour of Set Up _____ Ending Hour of Clean Up _____

Location - GGSDA Other (Name and Location) _____

Room(s) Requested _____

Equipment Needed (such as mics, projectors, chairs, tables) _____

Expected Attendees _____

Set-up Crew _____

Clean-up Crew _____

Additional Information _____

REMINDER: PLEASE MAKE TIMELY ARRANGEMENTS WITH APPROPRIATE PARTIES FOR ALL NEEDED EQUIPMENT AND FOR THE OPENING AND CLOSING OF THE ROOMS YOU ARE USING.