

**Calendar/Event Planning Form
Eastwood Baptist Church**

Name, Description, and target Audience of event:

Date & Time of Event: _____

Building/Rooms Needed: _____

(Diagram special room set-up on the back of this form.)

\$25 Deposit due at time of scheduling

_____ Deposit Paid

Contact Person: _____

Phone Number: _____

FOR EBC EVENTS ONLY:

Is Childcare needed for this event? _____ Yes _____ No

If yes, how many children and what age range? _____

(Example: 6 from 1 year to 3 years)

For Office Use Only:

Date submitted: _____

Approved By: _____

Placed on Church Calendar: _____