

# Event or Program Request

## St. William Parish

**Parish Mission:** *“To live the Good News so joyfully,  
that we can’t help but proclaim it!”*

**Parish Goal:** *To become an amazing parish that fosters discipleship and  
equips disciples to share the Good News.*

Contact Name: \_\_\_\_\_ Today’s Date: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Event: \_\_\_\_\_

Event (or first) Date: \_\_\_\_\_ Approximate number of persons expected: \_\_\_\_\_

☐ **Multiple dates?** If there are **multiple** or **recurrent** dates for this program, list below:  
(E.G. Every Tuesday, September through November, except for ....)

\_\_\_\_\_  
\_\_\_\_\_

Start of setup time: \_\_\_\_\_ Event end time: \_\_\_\_\_  
Event start time: \_\_\_\_\_ End of cleanup time: \_\_\_\_\_

### NOTE:

1. If the Parish Maintenance Staff is needed, please arrange details with the Business Manager (248-624-1421).
2. Noise from your event may affect adjacent areas. This may create a scheduling conflict with another event.
3. After confirmation of your request, it is *possible* that a Mission-related event may arise that conflicts with your reservation. If this should occur, you will be advised at least **two weeks** beforehand.

### Rooms Requested

- |   |   |
|---|---|
| <input type="checkbox"/> 1) Church (Affects 2,3,4)                | <input type="checkbox"/> 8) Zepf Hall—Upper (Affects 9)             |
| <input type="checkbox"/> 2) Vercelli Room (Affects 1,3,4)         | <input type="checkbox"/> 9) Zepf Hall—Lower (Affects 8)             |
| <input type="checkbox"/> 3) Activity Center North (Affects 1,2,4) | <input type="checkbox"/> 10) Education Center—Staff Lounge          |
| <input type="checkbox"/> 4) Activity Center South (Affects 1,2,3) | <input type="checkbox"/> 11) Education Center—Disciples’ Room       |
| <input type="checkbox"/> 5) Activity Center Kitchen               | <input type="checkbox"/> 12) Parking Lots (Main? By Grotto?)        |
| <input type="checkbox"/> 6) Activity Center St. Paul Room         | <input type="checkbox"/> 13) Other, or offsite (Explain, next page) |
| <input type="checkbox"/> 7) Rectory Gathering Room                | <input type="checkbox"/> 14) (Staff only) Classroom #s _____        |

### For Office Use Only:

Approved for calendar: \_\_\_\_\_  
Pastor or Business Manager

## Events or Programs: From Concept to Completion

1. **An idea** is presented for discussion at the Committee or Ministry Team level.
2. **If endorsed by that group**, but before moving forward, the idea is presented to the Pastoral Advisory Team, using this form. The Advisory Team may also present it to the Pastoral Staff.
3. **The proposal is evaluated** by the Pastoral Advisory Team and/or the Pastoral Staff according to how it supports the Parish Mission Statement and Parish Goal. Any calendar, physical, or personnel issues are identified. If the project is not approved, the reasons are provided.
4. **The approved project is returned to the Committee or Ministry Team for implementation.** Suggestions for enhancing Mission may be provided. Practical steps that need to be taken are noted, such as collaborating with other Ministry Teams, appointing committees, setting timelines and deadlines, and clearly identifying who will be responsible for each of the steps involved.

To help the Pastoral Advisory Team and the Pastoral Staff understand your proposed plans, please fill out this page. **If a fundraiser, also fill out pages 3 & 4** for submission to the Pastoral Advisory Team.

Description of the Event (Also explain "Other, or offsite") \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Purpose of the Event or Program—and how do you see it supporting our Parish Mission and Goal? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What steps do you envision to make your event happen? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there a cost to this event or program? \_\_\_\_\_ If yes, explain the costs and how they will be covered \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

PAT/Pastoral Staff Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Fill out the following if the event is a fundraiser:**

- Any fundraising that goes beyond the organization's membership (parish at large, general public) must be submitted to the Pastoral Advisory Team for approval.
- Please complete and return this form to the Church Office at least 8 weeks in advance of the activity.

Today's Date: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Describe Fundraising Activity: \_\_\_\_\_

Does this activity have a community building component?: (Yes/ No) Explain: \_\_\_\_\_

How does this fundraising enhance the Parish Mission and Goal?: \_\_\_\_\_

Purpose of the activity:

- Funds will benefit (Group/Organization): \_\_\_\_\_
- Funds will be used for (specific item/task): \_\_\_\_\_

Dates Requested for Activity: \_\_\_\_\_

Start of setup time: \_\_\_\_\_

Event start time: \_\_\_\_\_

Event end time: \_\_\_\_\_

End of cleanup time: \_\_\_\_\_

Where will the activity be held? \_\_\_\_\_

Is this a new or repeat activity? \_\_\_\_\_

Who will be the target of the fundraiser? (Church members, school families, etc.): \_\_\_\_\_

(Continued on page 4)

Estimated net funds to be raised (after expenses): \_\_\_\_\_

Are initial start-up funds needed? \_\_\_\_\_

If so, how will these be funded? \_\_\_\_\_

How will the money be collected? What safeguards are in place?: \_\_\_\_\_

\_\_\_\_\_

Are you required to have a permit or license for this activity?: \_\_\_\_\_

If so, who is responsible for obtaining the permits or licenses?: \_\_\_\_\_

\_\_\_\_\_

Signature of Organization's Representative

\_\_\_\_\_

Date Submitted

**NOTE:** If approval is granted, the Organization is responsible for following all Parish policies in the handbook of Parish Policies for Organizations. If the activity involves minors, all volunteers must be Protecting God's Children (PGC) certified, and no alcohol may be present at the event.

☐ Approved

☐ Not Approved (see Comments below)

\_\_\_\_\_

Pastoral Advisory Team representative

\_\_\_\_\_

Pastor/Business Manager

Pastoral Advisory Team Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Office Use Only:**

Date Received: \_\_\_\_\_

☐ Confirmed

Date Processed: \_\_\_\_\_

☐ Pending, due to calendar conflict.