

SONSCRIBER ~ REQUEST FORM

IN ORDER TO BE INCLUDED IN THE SONSCRIBER, THIS FORM MUST BE PLACED IN PHYLLIS' MAIL BOX IN THE COPY ROOM, OR EMAILED TO: PHYLLIS@IRPCFAMILY.ORG NO LATER THAN THE 20TH OF THE MONTH PRIOR TO THE NEXT ISSUE. PLEASE NOTE JUNE/JULY SONSCRIBER IS COMBINED.

BEFORE COMPLETING THE FORM:

1. SCHEDULE YOUR EVENT WITH THE CHURCH OFFICE TO MAKE SURE THE ROOM REQUESTED IS AVAILABLE.
2. IF USING A ROOM AT THE CHURCH, PLEASE COMPLETE A FACILITY USE REQUEST FORM.
3. IF YOU WANT YOUR EVENT PRINTED IN THE BULLETIN, PLEASE SUBMIT A BULLETIN REQUEST FORM TO PHYLLIS.

TODAY'S DATE: _____ YOUR NAME: _____

DAYTIME PHONE NUMBER(S): _____

EVENT INFORMATION

TITLE OF EVENT: _____

DATE OF EVENT: _____ TIME: FROM _____ TO _____ (AM/PM)

HAVE YOU CONFIRMED SPACE AVAILABILITY? " YES " NO

ROOM / LOCATION _____

RESERVATIONS OR REGISTRATION REQUIRED? _____

IF YES,

WHO DO THEY CALL? _____ # _____

WHEN IS THE DEADLINE? _____

WRITE ARTICLE EXACTLY AS YOU WANT IT TO APPEAR:

(Write on the back if you need more space)

" To enhance your article, would you like a picture or clipart added if available?

IF APPLICABLE:

HAVE YOU SUBMITTED A FACILITY USE REQUEST FORM TO PHYLLIS? " YES " NO

HAVE YOU CONFIRMED ROOM AVAILABILITY? " YES " NO

HAVE YOU SUBMITTED A BULLETIN REQUEST FORM? " YES " NO