EVENT/ PROGRAMMING ACTIVITY REQUEST

APPROVAL & AWARENESS OF FUNDRAISER ___/___BOARD of DIRECTORS ___/___CHURCH OFFICE ___/___AUDIO VISUAL ___/___MAINTENANCE

Please CIRCLE if this activity is meant to be a **program** or **fundraising** opportunity.

Title:		
Facilitator of Team Leader:		
	email	_
Co-Facilitator or Co-Leader:		
contact information: phone	email	_
Team members:		

Summary description of the activity (to be posted in bulletin & newsletter):

Spiritual Path: Our paths reflect that "Personality types and spiritual types help us develop our selfawareness and our self-understanding" (H. Neinast). Types help us uncover the things that give us energy and joy, understand how we make decisions and why we interact with the world around us the way we do.

___Learning - getting together to teach and learn

___Gathering - sharing emotional experience

___Being - contemplative focus on self

___Serving - service and social awareness

Time frame:

__One time event

___Annual event

___Weekly sessions for ____number of weeks

Proposed date(s): ______ Proposed time of day(s): ______

___Church sponsored activity or ___Outside partnership activity

Space needed:

___Social Hall

___Chapel

___Conference Room

___Stage

___Sanctuary

___Kitchen

___Children's Room

___Study

__N/A; activity is located at _____

Address: ______

Materials needed:

A/V Equipment:

Proposed expenditures:

How will this cost be met?

Participant/Course Fee

__Fundraising; *please elaborate:_____*

___Church budget

___Scholarship assistance upon participants' request

Personal donation