EVENT SET UP FORM

First United Presbyterian Church Charlotte, NC 28202

Received by Date	
This form should be completed in its entirety at least five (5) work activity/ event. Completed forms must be submitted to the church of office at (704) 376-8014 or <u>secretary@fupcc.org</u> for additional que	ting days in advance for each office. Please contact the church
Contact Name	
Ministry Name	
Phone Number Email Address	
Name of Event E	stimated Attendance*
Event Date(s)	
Start Time AM PM End TimeAM P	PM
Requested Room(s) Alternate Location(s)	
Event Description (Describe the type of activity that is taking place.)	
*Security presence for events with guests or attendees of 50 or more anticipated is recommended /required.	
Set-Up Requirements	
#Round Tables #Rectangle Tables Podium	#ChairsEasel Stand
Audio/Video Requirements	
Wired Microphone Laptop Wireless Microphone Portable Screen Floor Model PA System	Portable Projector

Please sketch your room set-up request on the back of this form to ensure clarity