

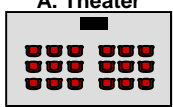

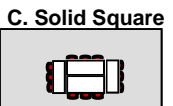
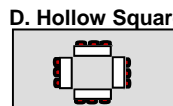
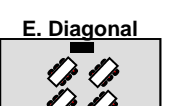
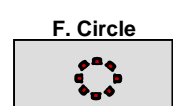
# EZ Calendar Form:simple setup; 25 people or less

<b>Date Submitted:</b>		
<b>Submitted By:</b>		
<b>Event Name:</b>		
<b>Event Description (5-10 words):</b>		
<b>Number Attending:</b>		
<b>Dept.</b>	<input type="checkbox"/> Admin <input type="checkbox"/> Adult <input type="checkbox"/> Care <input type="checkbox"/> Children <input type="checkbox"/> College <input type="checkbox"/> Community	<input type="checkbox"/> Compass <input type="checkbox"/> Evangelism <input type="checkbox"/> Family <input type="checkbox"/> High School <input type="checkbox"/> Middle School <input type="checkbox"/> Mission
		<input type="checkbox"/> Worship & Music
<b>Category:</b> <input type="checkbox"/> TUPC In-House Event		
<b>Viewed by:</b> <input type="checkbox"/> Staff Only <input type="checkbox"/> Website		
<b>TUPC Staff Contact:</b>		
<b>Event Contact:</b>		
<b>Phone:</b> (     )		
<b>Email:</b>		
Location (off campus)		
Address:		
City:	State:	Zip:

Event Date/Time Range		
Event Date From:		Overnight Event <input type="checkbox"/> Yes <input type="checkbox"/> No
Event Date To:		
Start Time:		<input type="checkbox"/> AM <input type="checkbox"/> PM
End Time:		<input type="checkbox"/> AM <input type="checkbox"/> PM
Setup Time:		Minutes
Cleanup Time:		Minutes

Reoccurrence Pattern			
<input type="checkbox"/> All	<input type="checkbox"/> Sun	<input type="checkbox"/> Jan	<input type="checkbox"/> Jul
<input type="checkbox"/> 1st	<input type="checkbox"/> Mon	<input type="checkbox"/> Feb	<input type="checkbox"/> Aug
<input type="checkbox"/> 2nd	<input type="checkbox"/> Tue	<input type="checkbox"/> Mar	<input type="checkbox"/> Sep
<input type="checkbox"/> 3rd	<input type="checkbox"/> Wed	<input type="checkbox"/> Apr	<input type="checkbox"/> Oct
<input type="checkbox"/> 4th	<input type="checkbox"/> Thu	<input type="checkbox"/> May	<input type="checkbox"/> Nov
<input type="checkbox"/> 5th	<input type="checkbox"/> Fri	<input type="checkbox"/> Jun	<input type="checkbox"/> Dec
<input type="checkbox"/> Last	<input type="checkbox"/> Sat		
<input type="checkbox"/> Every Other			

Please indicate rooms to be scheduled.

Meeting/Classrooms			Sanctuary	Outside Areas
<input type="checkbox"/> 101 Classroom <input type="checkbox"/> 102 Classroom <input type="checkbox"/> 103 Classroom <input type="checkbox"/> 201 Classroom <input type="checkbox"/> 203 Classroom <input type="checkbox"/> 303 Classroom <input type="checkbox"/> 304 Classroom <input type="checkbox"/> 305 Classroom	<input type="checkbox"/> 500-A <input type="checkbox"/> 500-B/C <input type="checkbox"/> 501 <input type="checkbox"/> 502 <input type="checkbox"/> 503 <input type="checkbox"/> 504 <input type="checkbox"/> 505-A <input type="checkbox"/> 505-B	<input type="checkbox"/> 400 Kilgore Patio <input type="checkbox"/> 401 <input type="checkbox"/> 402 <input type="checkbox"/> 405 <input type="checkbox"/> WELL <input type="checkbox"/> Conference Room <input type="checkbox"/> Fireside Room	<input type="checkbox"/> Bride's Room <input type="checkbox"/> Choir Room	<input type="checkbox"/> 300 Fenced Grass Area <input type="checkbox"/> Basketball Court <input type="checkbox"/> Volleyball Court <input type="checkbox"/> Early Childhood Patio <input type="checkbox"/> 400 Kilgore Patio <input type="checkbox"/> Kilgore Patio BBQ
Setup (circle one) <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <b>A. Theater</b>   </div> <div style="text-align: center;"> <b>B. Seminar</b>   </div> <div style="text-align: center;"> <b>C. Solid Square</b>   </div> <div style="text-align: center;"> <b>D. Hollow Square</b>   </div> <div style="text-align: center;"> <b>E. Diagonal</b>   </div> <div style="text-align: center;"> <b>F. Circle</b>   </div> </div>			Audio Visual Who will be operating equipment? _____ <input type="checkbox"/> AV Cart (PowerPoint / DVD) <input type="checkbox"/> Overhead Projector <input type="checkbox"/> Podium <input type="checkbox"/> Projection Screen (Portable) <input type="checkbox"/> TV/VCR/DVD <input type="checkbox"/> Microphone <input type="checkbox"/> Need custodian to move equipment to room	714.544.7850  