



Event Request Form

This form is for the request of internal church events and is required to be correctly completed and submitted along with required health and safety forms before the Church Board will approve the event. The Pine Rivers Seventh Day Adventist Church reserves the right to not approve or cancel an event if it is deemed unsuitable or unsafe.

Pine Rivers Seventh-day Adventist Church
Postal Address:
PO Box 209,
Kallangur Queensland, 4503.
Street address:
Hughes Road East (entry off Old Gympie Road), Dakabin, Queensland 4503
Mobile: 0401 222 544 (wk)
Residence: 07 3204 4928 (ah)
Email: andrehamilton@adventist.org.au

Please complete all sections of this form and return to pinerivers.communications@gmail.com for submission to the Board for approval.

Name			
Phone			
Email			
Date Submitted			
Ministry Group			
Event Name			
Purpose of Event			
Event Type <small>(Circle)</small>	One off	Reoccurring	Series
Preferred Date/s			
Alternative Date/s			
Time <small>Include set up and pack up</small>	Start:	Finish:	
Facility Required <small>(Circle)</small>	Church	Hall	Kitchen
	External event	Location:	
Childdsafe Approved			Yes No
'Task Safety Analysis' form complete and attached			Yes No
'Team Leader Safety and Care Agreement' complete and attached			Yes No
<i>These forms can be found in the Church Events tab on the website</i>			

Office use only

Date Received			
Action	Approved	Not Approved	Further information required
Notes			
Signature			

