



WORD FOR LIFE CHURCH MINISTRIES

11519 Ft. Washington Road, Ft. Washington, MD 20744-5831

301-292-2066 | wordforlifechurch.org

2023 Ministry Planning and Financial Advance Request Form

Ministry or Group Sponsoring the Event: _____

Event Description: _____

How does this event align with WFLCM's discipleship and outreach efforts? _____

Ministry Contact Person: _____ Telephone Number: _____

Desired Date(s): _____ Time of Event: _____

(Event approval is subject to pastoral confirmation)

BUDGET

Finances: ☐ Budgeted ☐ No Funds Required ☐ Funds to be obtained from other resources
(Mark the appropriate response and, if necessary, provide the \$\$ amount.)

Itemize Expenses:

Projected Financial Gain:

\$ _____
\$ _____
\$ _____
\$ _____

Projected Number of Participants: _____ Total: \$ _____

Event to be held: Hybrid (in-person and virtual): ☐ Virtual only: ☐ Live Stream: ☐ Zoom Required: ☐

Facilities Needed: ☐ Sanctuary ☐ Kitchen ☐ Conference Room ☐ Church Exterior Grounds

Publicity/PR Venue: ☐ Website ☐ Social Media ☐ Newspaper ☐ Flyers/Posters ☐ Radio/TV

Target Age Group: ☐ Pre-School/Youth (3-5) ☐ Pre-Teens (6-9) ☐ Teens (10-12) ☐ Young Adults (13-17) ☐ Older Adults (18-35) ☐ Senior Adults (36-59) ☐ (60 and older)

Transportation: ☐ Bus(es) Reserved ☐ Van(s) Reserved ☐ Driver(s) Enlisted

Ministry Leader should obtain the Director's signature and email the form to the Trustee Chair at: ddfarrow@aol.com

1. Ministry Leader: _____
SIGNATURE / DATE

2. Ministry Director: _____
SIGNATURE / DATE

3. Chair, Trustee Ministry: _____
SIGNATURE / DATE

4. Approval/Disapproval: _____
(Senior Pastor) SIGNATURE / DATE