



CENTRAL UNITED METHODIST CHURCH

Information is needed 2 weeks prior to event!

Submission Date: _____

Submitted By: _____

Publicity Request

Name of Event: _____

Description of Event: (please be specific, use back if necessary)

Contact Person/Group: _____

Best way to contact you: _____

Date of Event: _____

Time of Event: _____

*Publicity Requested: Chimes/eNewsletter Article Poster

Sunday Announcements Insert in Bulletin Table Tents

Website Facebook/Social Media Friendship Folder

Church Electric Sign

*Do You Need Something Created? Pamphlet/Insert Press Release

Sign Up Sheet Poster (Please provide sufficient time to complete your request.)

Publicity Start Date: _____ Publicity End Date: _____

Please attach or email (preferred) any articles or information needed to complete this project. Also include graphic files if logos or other imagery is needed.

*Room Request? What room would you prefer? _____

*Please make sure to confirm dates and rooms with Rachel in the Church office

All publicity is at the discretion of the staff.

Office Use Only	Copies to: <input type="checkbox"/> Rachel <input type="checkbox"/> Robin
	<input type="checkbox"/> Kevin - Worship Component
	<input type="checkbox"/> Facilitator