



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 the Church office.**
- All publicity is at the discretion of the staff.

Office Use
Only

Copies to: ☐ Office ☐ Marketing

☐ Music Director - Worship Component

☐ Facilitator