

MINISTRY INFORMATION

The information provided on this form is used to update the website, handle inquiries about your ministry, and coordinate any potential use of campus space (when we return to in-house services). This form is also available online.

**Please continue to use the Event Support Form or Rehearsal Form for event planning and fellowships.

ABOUT OUR MINISTRY		
Ministry Name:		
Ministry Email (should be separate from your own):		
Leader #1:	Email:	
Phone Number(s):	Is text okay? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Leader #2 (co-chair):	Email:	
Phone Number(s):	Is text okay? <input type="checkbox"/> Yes <input type="checkbox"/> No	
WHERE TO FIND US		
On which day of the week do you meet? (check all that apply) (PRE-COVID)		
<input type="checkbox"/> 1st Thursdays <input type="checkbox"/> 2nd Thursdays <input type="checkbox"/> 3rd Thursdays <input type="checkbox"/> 4th Thursdays <input type="checkbox"/> 5th Thursdays <input type="checkbox"/> Other _____		
Start Time	End Time	Do you need the doors unlocked for your meeting/rehearsal? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, what time: _____)
COVID: Do you have regular online ministry meetings? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, what day and time: _____)		
Where? <input type="checkbox"/> Zoom <input type="checkbox"/> Facebook Messenger Rooms <input type="checkbox"/> Google Hangouts <input type="checkbox"/> Other _____		
Where are your ministry meetings/ministry leadership meetings held? (PRE-COVID)		
<input type="checkbox"/> Classroom A <input type="checkbox"/> Classroom D <input type="checkbox"/> Classroom 1 <input type="checkbox"/> Classroom 5 <input type="checkbox"/> Open Area of the Fellowship Hall	<input type="checkbox"/> Classroom B <input type="checkbox"/> Classroom E <input type="checkbox"/> Classroom 2 <input type="checkbox"/> Sanctuary <input type="checkbox"/> Off Campus/No Room Needed	<input type="checkbox"/> Classroom C/Nursery <input type="checkbox"/> Classroom F <input type="checkbox"/> Classroom 4/Media Table <input type="checkbox"/> Balcony <input type="checkbox"/> Choir Stand
SOCIAL MEDIA PAGES (please list your ministry's social media links)		
<input type="checkbox"/> Facebook: _____ <input type="checkbox"/> Instagram: _____ <input type="checkbox"/> Twitter: _____ <input type="checkbox"/> YouTube: _____ <input type="checkbox"/> Other: _____		
Who manages your social media accounts?		
CHANGES TO WEBSITE		
Focus Scripture:		
Vision:		
Mission:		
Purpose/Reasons for Existence:		
Objectives:		
Impact on PRBC:		