

## Cornerstone Ministry and Event Planning Sheet

Date of Event \_\_\_\_\_ to \_\_\_\_\_

Event Start Time \_\_\_\_\_ Event End Time \_\_\_\_\_

Set up Time \_\_\_\_\_ Clean up Time \_\_\_\_\_

**Event Title:**

\_\_\_\_\_

**Announcement (description) to be printed:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Core Value (select one):**    Worship    Evangelism    Discipleship    Fellowship    Missions    Family

**Primary Purpose (select one):**    Win    Build    Equip

**Organizer/Leader Name:** \_\_\_\_\_

Committee Members and their Responsibilities (setup, cleanup, decorations, publicity, speaker, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please note to all committee members: reimbursement requests must contain original receipts.**

Prayer Team Members:

\_\_\_\_\_

\_\_\_\_\_

Target Population (Who are you inviting?):

- |                                    |                                     |                                      |                                   |
|------------------------------------|-------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Community | <input type="checkbox"/> All Church | <input type="checkbox"/> Children    | <input type="checkbox"/> Youth    |
| <input type="checkbox"/> Men       | <input type="checkbox"/> Women      | <input type="checkbox"/> Parents     | <input type="checkbox"/> Marrieds |
| <input type="checkbox"/> Singles   | <input type="checkbox"/> Seniors    | <input type="checkbox"/> Other _____ |                                   |

\_\_\_\_\_

**Event Location:**

**Morro Road** (check all that apply)

- Room(s):     Sanctuary             Nursery             Pre-K             K-2
- Fellowship Hall        Kitchen             3-5             6-8
- Resource Room        Cry Room            Blue Room     Prayer Room
- Lobby                     Parking Lot

**Santa Rosa Road Campus** (check all that apply)

- Room(s):     Classroom             Kitchen             Lobby             Parking Lot
- Reception               Counseling 1       Counseling 2

**Off site location:** \_\_\_\_\_

**Furniture and Resources Requested:** (Enter quantity where appropriate):

\_\_\_\_\_ Tables-Round    \_\_\_\_\_ Tables-Rectangle    \_\_\_\_\_ Blue Chairs    \_\_\_\_\_ Folding Chairs

\_\_\_\_\_ Tablecloths    \_\_\_\_\_ Refrigerator/Stove    \_\_\_\_\_ Coffee Pot

Short description of room setup \_\_\_\_\_  
\_\_\_\_\_

**Setup, Decorating, and Cleanup Crews:**

Person in charge of setup for event \_\_\_\_\_ When? \_\_\_\_\_

Who is in charge of decorating? \_\_\_\_\_ When? \_\_\_\_\_

Person in charge of cleanup for event \_\_\_\_\_

(Please vacuum the rooms used, clean kitchen (if used), mop kitchen floor if used, empty trash cans and recycling, clean bathroom sinks and toilets, restock supplies, return all items to their original location, pick up miscellaneous papers, pens, jackets, etc., and notify office staff or ministry leaders of any items that need to be bought or ordered.)

**Audio and Visual Needs:**

**Please note A/V Technician(s) must be a Cornerstone trained technician(s).**

Sound Technician?     Yes     No                    Power Point/Video Technician?     Yes     No

Sound Tech Name \_\_\_\_\_ Video Tech Name \_\_\_\_\_

Amount to be paid to technicians?            Sound tech \_\_\_\_\_ Video tech \_\_\_\_\_

- Will speaker use the church computer system?  Yes  No
- Will speaker use a personal system (tablet, etc.)?  Yes  No
- Will speaker use a monitor?  Yes  No
- Will you need to play a DVD?  Yes  No
- Will the speaker or performance need to be recorded?  Yes  No
- Will there be a dress rehearsal or practice?  Yes  No

If so, when? \_\_\_\_\_

Which microphone will be used? \_\_\_\_\_

Do you need multiple microphones?  Yes  No If "Yes," how many? \_\_\_\_\_

If recorded, where would you like it saved or uploaded? \_\_\_\_\_

Please list the musical instruments to be used: \_\_\_\_\_

### Admin Support:

Check all that apply:

**Signups:**  **Connect Card:** Check the following notes that need to appear on Connect Card below the event.

- "Mark # attending \_\_\_\_\_"
- "Registration link be sent"
- Options: i.e., day of week or time choice. Please list: \_\_\_\_\_
- \_\_\_\_\_
- Other: \_\_\_\_\_

**Information Counter:** Please check the type of signup sheet needed.

- Participant  Potluck  Childcare

If childcare, for what ages? \_\_\_\_\_

Other: \_\_\_\_\_

Check the fields below that you want on your signup sheet.

- Name  Phone  Email address
- Child's name  Child's Age  Parent's Name
- Paid  Potluck/food item  Number attending \_\_\_\_\_
- Other: \_\_\_\_\_

Additional Instructions: \_\_\_\_\_

**Printed Materials**

Will the speaker need an outline/handout typed and printed by the church office?  Yes  No

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**Office Supplies:**

**Please check all office supplies needed:**

Name Tags  Pens  Pocket folder  Pocket folder with 3-hole punch

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**Registration:**  Information Counter  Online Registration  Not needed

Is there a registration deadline?  Yes  No If yes, what is the date? \_\_\_\_\_

What is the ticket cost/fee? \_\_\_\_\_

Please list all registration information needed such as **names, total number attending, and ticket price breakdown:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Publicity:**

Do you want a bulletin insert made for your event?  Yes  No

Graphic will be chosen by:  office staff  event leader/committee

**Please note all announcements and flyers are subject to staff approval.**

**Bulletin Insert information is due in the office a minimum 3 full weeks** prior to the event in order for bulletin inserts to be run two weeks prior to the event. Please adjust due date by the amount of weeks you wish to publicize your event.

What dates do you want the inserts to run? \_\_\_\_\_

Do you want an announcement slide (shown on Sundays)?  Yes  No

Do you want a website graphic and announcement?  Yes  No

Do you want to include the registration form link with the graphic?  Yes  No

Do you want the event posted on Facebook?  Yes  No

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**Childcare:**

Will childcare or activities be provided?

What will be the parent's cost per child? \_\_\_\_\_

Childcare workers' names: \_\_\_\_\_

Payment due childcare workers (per person)? \_\_\_\_\_

Do childcare workers have appropriate clearance?  Yes  No

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**Food:**

Will food be:  catered  potluck  no food

How will the food be served?  self-serve buffet  buffet servers  table servers

**Kitchen supplies:**

Will you use the:  kitchen stock supplies  purchase your own

Check supplies needed:

dinner plates  dessert plates  disposable silverware

cold cups  hot cups  napkins  coffee

Person(s) in charge of food and kitchen for this event: \_\_\_\_\_

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**Speaker's Fee and Care:**

Name: \_\_\_\_\_ /\$ \_\_\_\_\_

Name: \_\_\_\_\_ /\$ \_\_\_\_\_

Name: \_\_\_\_\_ /\$ \_\_\_\_\_

Who is in charge of requesting the check? \_\_\_\_\_

Who will receive the signed check and give to the speaker? \_\_\_\_\_

If speaker needs lodging, where will he/she be housed? \_\_\_\_\_

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**OFFICE USE ONLY**

Budget Amount \$ \_\_\_\_\_ Budget Category: \_\_\_\_\_

Ministry Leader Approval: \_\_\_\_\_

Elder Board Approval: \_\_\_\_\_

Church Calendar Approval: \_\_\_\_\_

AV Technician Assigned: \_\_\_\_\_

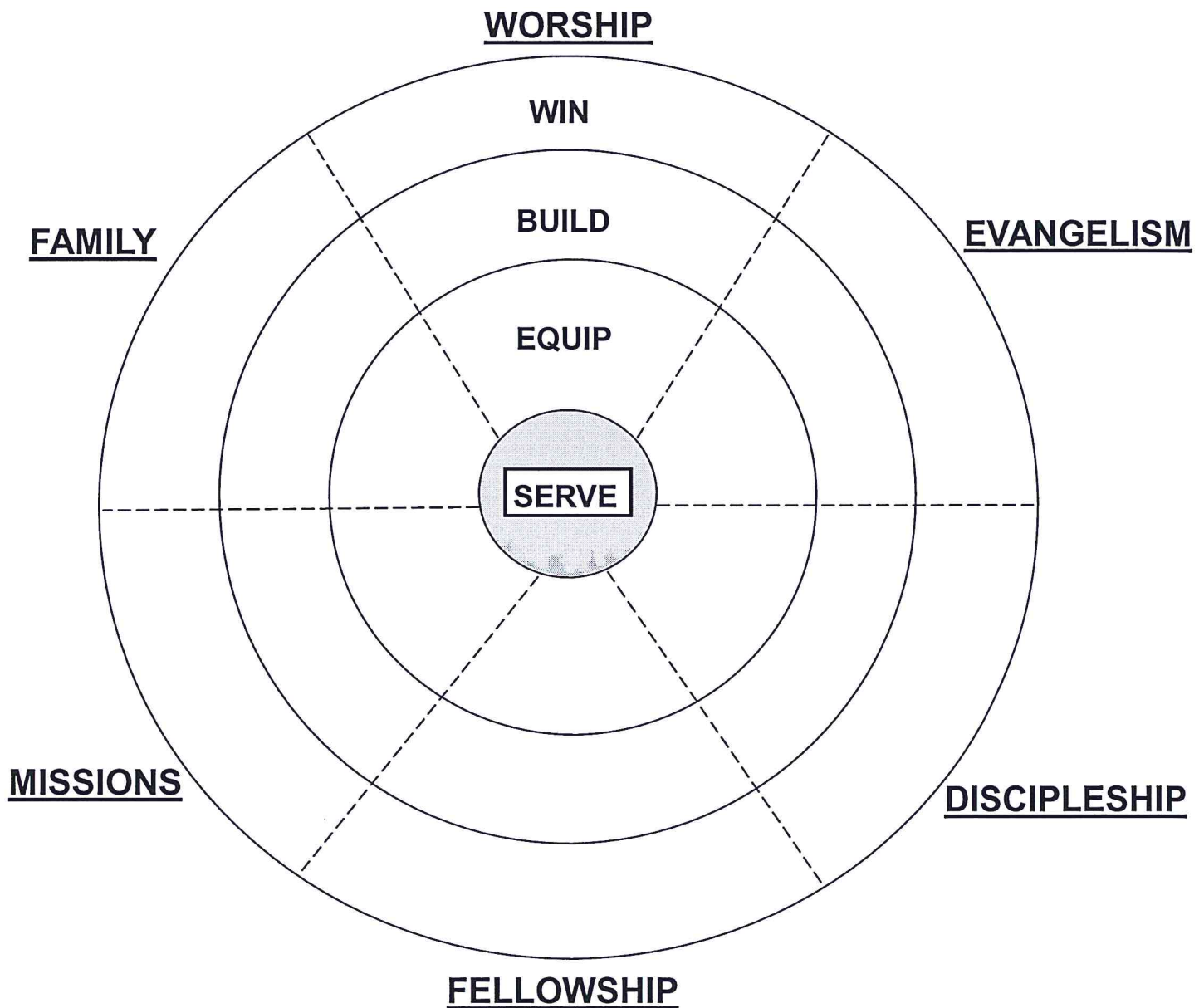
Facilities Ministry Leader: \_\_\_\_\_

Janitorial Volunteer: \_\_\_\_\_

Kitchen Ministry Leader: \_\_\_\_\_

# HOW DO WE DO MINISTRY AT CORNERSTONE?

## Win, Build, and Equip Disciples to Serve the Lord



### The Process

- Name the church activity/program
- Determine what area of ministry (core value) it belongs to
- Know the primary purpose: *Win* the lost  
*Build* up the believer  
*Equip* the worker to serve
- Name the leader and an assistant
- Determine the location and the frequency (weekly, monthly, annually)
- Establish the prayer base
- Fill in all the information on the other side and submit to the church secretary. The secretary will forward it for the necessary approvals.**