

# SAN ANTONIO DE PADUA EVENT APPROVAL FORM

Today's Date: \_\_\_\_\_

Name of Organization/Ministry Requesting Event: \_\_\_\_\_

Chairperson/Director: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

## EVENT INFORMATION

Event: \_\_\_\_\_  One Day Event  Overnight Event

Place of Event: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Contact: \_\_\_\_\_ Date of Event: \_\_\_\_\_ Time: \_\_\_\_\_

Number Attending Event: \_\_\_\_\_ Permission Slips Required (children event): Yes  No

## SALES

Items being sold: Yes  No  If yes, describe: \_\_\_\_\_ Cost \_\_\_\_\_

## VENDOR

Outside Vendor Needed: Yes  No

If yes: Name of Vendor \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact: \_\_\_\_\_ email \_\_\_\_\_

## CHAPERONES

Chaperones Needed: Yes  No  Chaperone Ratio: \_\_\_ Adult for Every \_\_\_ children

**NOTE: Ratio Maximum - 1 adult to every 10 children**

All Chaperones: Fingerprinted: Yes  No  Safe Environment Trained: Yes  No

Received Acknowledgement Page From Policy Against Sexual Misconduct Handbook: Yes  No

## TRANSPORTATION

Transportation Needed: Yes  No  If Yes, Method of Transportation:

Bus

Adult driving on own to and from event

Parent(s) take & pick up own child to and from event

Parent(s) drive on behalf of organization/ministry to and from event

Pastor's Approval Yes  No  \_\_\_\_\_

Pastor's Signature

Date