Rev. Dr. J. Wendell Mapson, Jr., Senior Pastor

EVENT / ACTIVITY FLYER REQUEST FORM

**NO PROMOTIONAL MATERIALS OF ANY KIND SHOULD BE DISTRIBUTED
WITHOUT COMPLETION OF THIS FORM**

Date Submitted:				
Ministry Name: _			Requestor:	
Name of Event: _				
Date of Event:				
	Day of week	Month	Date	Year
Start Time:		Approx	x. End Time:	
Address of Event	:			
Location of Event	t:			
Pricing:				
Adults		\$		
Children age _	to	\$		
Children age _	to	\$		
Fuent Details: Inc	Nudo monu and activition	s planned such as ent	cortainments checkers	door prizes etc. and times
		•	ertainments, speakers,	door prizes etc. and times
	as dinner, bus times, et			
	needed?			
Is there a specific	color scheme of specifi	ic photos that need to	be added to flyer?	
Yes	No (If ye	es, please specify / em	ail photos to mbcpromo	o1@gmail.com)
Does this event n	need to be added to cale	endar of events on ou	r wehsite? Vas	No

Would you like this event promoted on our so	ocial media pages? (Facebook, Twitter, Instagram)
Yes No	
Would you like to sell tickets for your event v	via our church's website? Yes No
Special Instructions/Other Information –	
Ministry Name:	
	Contact Number:
Signatures (include date):	
Requestor:	
Ministry Leader:	
Creative Director:	

Return this form to Executive Director's Mailbox or email to mbcpromo1@gmail.com

Flyer(s) will take 1-2 weeks to complete.