

SCC SPECIAL EVENT REQUEST

Name of Event _____ Date of Event _____

Leaders Name _____ Leaders Phone _____

Contact Person _____ Contact Phone _____

Event Date _____

Time and Length of the Event _____

Any Items needed should be purchased by the event leader. (Prior to Purchase -Must complete Request/Authorization for Purchase)

Who will be opening the building? _____

Who will be closing? _____

Who will be involved? What is there roll? (ie. Speakers, Special Music*)

*Must receive approval PRIOR to asking speakers, special music and special guests

Ushers? Yes / No

Sound Technician? Yes / No

Security? Yes / No

Custodian? Yes / No

Parking Attendants? Yes / No

Special Comments

**Requests may be turned to the main office during normal business hours – Monday – Thursday ONLY

***Deadline for requests is a minimum of **3 WEEKS** Prior to allow for approval and proper advertisement

Your Signature _____

Event Is Approved _____ Event Is Denied _____

Southtowns Christian Center
Phone (716) 627-2183 Fax (716) 627-2336