



Kitchen Ministry Request Form

Must be submitted 30 days prior to event

Event Name: _____ Event Date: _____

Contact Name: _____ Email: _____ Phone: _____

Hours of Event: _____ Expected Attendance for Event: _____

General Description of Event: _____

The three following details must be completed prior to submitting this form.

- _____ Main office has placed this event on the church calendar
- _____ Budget for this event has been approved (if BEFC Ministry)
- _____ Facilities department has received details for room set-up (tables/chairs, serving tables, etc.)

Description of Need from Kitchen Ministry: (food prep, serving style, host) _____

Name responsible for expenses: _____

Expenses: Please list menu and serving items needed.

Food/Beverage: List Menu	Serving items to purchase
	Plates/Cups
	Napkins/Silverware
	Tablecloths

Other: _____

Questions: Diane Huston: 763-443-4896

The Kitchen Ministry Director will connect with you regarding the details of this request.

Kitchen Ministry Use Only:

Approved by: Kitchen Ministry Director: _____ Connections Director: _____ cc: Office: _____



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FOR KITCHEN MINISTRY ONLY

BEFC Event Evaluation:

Kitchen Team:

Expected attendance: _____

Actual attendance: _____

Budget: _____

Expenses: _____

Event Notes:

(What worked; what needs to change; items needed that were not planned for; etc.)

Kitchen Ministry Use Only:

Approved by: Kitchen Ministry Director: _____ Connections Director: _____ cc: Office: _____