



## Scheduling Request

Date Making Request:\_\_\_\_\_ Date of Meeting:\_\_\_\_\_

Day of Meeting: ☐ Su ☐ M ☐ Tu ☐ W ☐ Th ☐ F ☐ Sa

Arrival Time:\_\_\_\_\_ Departure Time:\_\_\_\_\_

Name of Group Meeting:\_\_\_\_\_

Room Requested:\_\_\_\_\_ (*Morrison Hall, gym, Conference Room, etc.*)

Number Attending Meeting:\_\_\_\_\_

Nursery Needed: ☐ Yes ☐ No Time:\_\_\_\_\_

Contact Name & Signature:\_\_\_\_\_

Contact Person Email:\_\_\_\_\_ Phone:\_\_\_\_\_

Please submit requests to Missy McCain in the church office at [missy@trinitylittlerock.org](mailto:missy@trinitylittlerock.org), or a hard copy may be submitted in the church office at the front desk at least two weeks before the event.

Church Phone: 501-372-0294

Church Fax: 501-372-0416

*All pages must be completed. Alcohol policy is signed and included.*

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For Office Use Only

Conflicts:\_\_\_\_\_ Posted on Office Calendar- Date: \_\_\_\_\_

Sexton Scheduled on Duty:\_\_\_\_\_ Sexton Notified on Date: \_\_\_\_\_

Approved by:\_\_\_\_\_