A close up of a logo

Description automatically generated **Event Proposal**

Please complete the information below and return to the Pastoral Associate. All new events must have the Pastor’s approval and align with the vision and mission of Saint Thomas Aquinas Catholic Parish. Events involving other parishes will require deanery and diocesan approval. Events may require Pastoral Council Review as well.

Name of event, if available yet: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed Date and Time of event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose Statement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How will this help the parish achieve its mission? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What facilities do you anticipate using? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Intended Audience:

Potential Coordinator of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Night: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposal Submitted by: (\_\_Same) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: Day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Night: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ministry Category: (check all possibilities)

\_\_\_Administration & Support \_\_\_Formation & Faith \_\_\_Liturgical \_\_\_ Service & Social \_\_\_

Child Development Center \_\_\_Leadership \_\_\_Affiliated Group: \_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participation of Clergy: Pastor \_\_\_ Deacon \_\_\_ Diocesan Priest \_\_ Priest from outside of Diocese \*\_\_\_ \*Must obtain letter of good standing and diocesan approval if not a Diocese of Austin priest.

Speaker/Performer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Registered with Diocese’s Speaker’s Bureau? \_\_\_\_\_\_\_\_\_\_

Participation Expectations of Church Staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Required for success of Event \_\_\_Verbal support and publicity only \_\_\_No participation required

Will any parish/affiliated groups be involved? ­­­\_\_\_No \_\_\_Yes, if so, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will other Parishes be involved? \_\_\_No Yes, if so who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Invite only \_\_\_Joint Event (Diocesan/Deanery approval required)

Who will be considered the main sponsor: \_\_\_\_Parish \_\_Affiliated group\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If event planning will involve scheduled meetings, please answer the following: (check all that apply)

\_\_\_Weekly \_\_\_Monthly \_\_\_Bi-monthly \_\_\_Quarterly \_\_\_Semi-annually \_\_\_As needed \_\_Other: \_\_\_\_\_\_\_\_\_\_\_

Preferred day of week? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred time of meeting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Length: \_\_\_\_\_)

**How many people do you anticipate involving in this event?**

As Leaders/Volunteers: \_\_\_\_\_\_\_\_ As participants only: \_\_\_\_\_\_\_\_

**Will there be a fee to attend?** \_\_\_No \_\_\_ Yes, if so, how much? \_\_\_\_\_ How will it be collected? \_\_\_\_

**What resources do you anticipate needing?**

\_\_\_Childcare \_\_\_Audio equipment \_\_\_Projector \_\_\_Meeting space

\_\_\_Kitchen access, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Other resources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Publicity: \_\_\_Weekly bulletin \_\_\_Web \_\_\_Email service

Will there be alcohol involved in the event? \_\_\_No \_\_\_ Yes, if so, who will obtain the necessary permits and insurance? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Budget: $\_\_\_\_\_\_\_\_\_\_\_\_\_ Funding sources: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated expenses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Décor Plans: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Proposed Training Opportunities for Volunteers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other than staff, council approval and publicity, what needs to happen before this event begins?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Initial each of the following statements.

\_\_\_\_\_ I understand this event functions under the authority of Saint Thomas Aquinas Catholic Parish and the Pastor, and will be under the direction of the Pastoral Associate/ Parish Business Administrator.

\_\_\_\_\_ I understand that all event dates must be approved in advance and placed on the church calendar in coordination with the Pastoral Associate/Parish Business Administrator.

\_\_\_\_\_ I understand that the church will not be held liable for financial indebtedness incurred outside of established policies and procedures.

\_\_\_\_\_ I understand that the leaders of the church are responsible to God for the overall effectiveness of the church and must sometimes make decisions which may adversely affect this particular event.

\_\_\_\_\_ I understand all event leaders and volunteers must have completed Ethics in Ministry (EIM) requirements set forth by the Diocese of Austin.

\_\_\_\_\_ I understand that any fundraising efforts or appeals for money, if allowed, must be approved in advance by the Parish Business Administrator/Pastoral Associate.

\_\_\_\_\_ I understand that I may not assign work to church personnel without the permission of the Parish Business Administrator/Pastoral Associate/ Formation Director/Facilities Director.

\_\_\_\_\_ I understand that serving of alcohol at meetings/events requires additional approval.

Please attach a list of individuals who have committed to helping with this potential event and whether they have completed EIM requirements for the Diocese of Austin.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed Date

**Staff Use Only:**

1. Date Request Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Date Request submitted to Pastor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Date Request will be submitted to Pastoral Council: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request Status: \_\_\_Accepted \_\_\_Denied \_\_\_More information needed Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Supervisor Assigned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_