

Church of the Resurrection Communication Form

Thank you for agreeing to be a contributor to the communication ministry of our Church. Please fill in the form below and return it to the Director of Communications. We need at least 2 weeks' notice. We will take your basic information and use it in a variety of communication formats. Please call the office at 507-288-5528 ext. 107 if you have questions.

Name of activity _____ Date of activity _____

Sponsored by _____

Person in charge _____ phone # _____

Location of event (room) _____

If not at Resurrection, please give directions and a name and phone # for the location:

Start time: _____ End time: _____ Cost for participant: _____

Child care available? No Yes Location and cost: _____

Who is invited? (age group, parish, etc.): _____

Describe the activity:

Any other information we need to know:

I would like it in:

Bulletin Preferred Dates(max. 3) _____
Preferred Text: _____

Web site Preferred Starting Date _____
 Bulletin board Person to do it _____
 Announcement Date preferred _____
 Other _____
 Flyer Attached _____

Form Completed by: _____ Date _____

Filling out this form does not guarantee specific advertising. While we will try to honor your requests, Resurrection reserves the right to decide when and by what means we communicate this information.

