

FIRST BAPTIST CHURCH OF GLENARDEN

CONFERENCE/SEMINAR ATTENDANCE REQUEST FORM

THIS DOCUMENT SHOULD ACCOMPANY YOUR BUDGET REQUEST.
PLEASE USE A SEPARATE FORM FOR EACH CONFERENCE OR SEMINAR.

NAME OF MINISTRY _____ YEAR OF REQUEST _____

MINISTRY LEADER _____ PHONE NUMBER _____

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### *NAME OF CONFERENCE/SEMINAR*

Location CITY \_\_\_\_\_ STATE \_\_\_\_\_

Dates of Event FROM \_\_\_\_\_ TO \_\_\_\_\_

Number of proposed attendees \_\_\_\_\_

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BREAKDOWN OF COSTS

(PLEASE INDICATE COST PER ATTENDEE)

Registration _____ Lodging _____ Food (use \$60.00 per day as a guide) _____

Required Materials _____ Rental Vehicles (if appropriate) _____ Transportation _____

AIR TRAIN PERSONAL VEHICLE OTHER

TOTAL ANTICIPATED COST PER ATTENDEE _____

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### *BENEFITS TO THE MINISTRY OF FBCG*

Submitted By \_\_\_\_\_

Date \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_