

GENERAL INFORMATION

First Name	Last Name	Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address	Ministry	
<input type="text"/>	<input type="text"/>	
Have you submitted (or are you submitting) a facility request?		<input type="checkbox"/> Yes <input type="checkbox"/> No

HEADLINE FOR BULLETIN ITEM

*i.e. Mark your Calendars, Upcoming Meeting, etc.*

INFORMATION SUBMISSION

**Your article will be more readable when limited to 150 words or less.**

- Your article may be subject to editing to fit available space.
- Please be concise (bullets & highlights are easier to read than long paragraphs).
- Double check facts, contact points, etc, to avoid printed errors.
- Be sure to include date, time, and location for events.

PUBLISHING DATES

Please list <i>two</i> bulletin dates for publication.	1st Date	2nd Date
	<input type="text"/>	<input type="text"/>

OFFICE USE

Received by: _____	Date: _____	Calender check: _____
Published by: _____	Date: _____	