

Power For Life Strength Team

Crusade Preparation Check List

Please fill out the following information in the space provided and sign this form. You can email it back to your event coordinator –David McClure bodybuilders33@yahoo.com to email this form, click on each gray box and type the requested information. You can then save the file and email to your event coordinator.

Church Name:

Crusade Dates:

1. The name and phone number (mobile preferably) of the person picking up the team at the airport.

Driver's Name:

Phone Number (mobile preferred):

2. Hotel name, address, phone number, and fax number where the team will be staying and the number of rooms booked.

Hotel:

Address:

Phone Number:

Fax Number:

Number of Rooms:

3. Name of churches where the other team members (Not team leader) will be speaking. We need the name of the church, the Pastors' name, contact info on the person picking them up, the time they will be picked up, and the time they will be returning.

Church 1 Name:

Pastor's Name:

Driver's Name:

Pickup Time:

Contact Number:

Drop off Time:

Church 2 Name:

Pastor's Name:

Driver's Name:

Pickup Time:

Contact Number:

Drop off Time:

Church 3 Name:

Pastor's Name:

Driver's Name:

Pickup Time:

Contact Number:

Drop off Time:

Church 4 Name:

Pastor's Name:

Driver's Name:

Pickup Time:

Contact Number:

Drop off Time:

4. Please supply the meal times for the Team:
 Breakfast Time:
 Lunch Time:
 Light Meal Time (pre-service):
 Dinner Time (post-service):
5. Will the team have access to a church van/vehicle/rental vehicle (SUV or van)? YES NO

If NO, a driver will need to ensure that the team is at the church 1 1/2 hours before each service.

6. Will you supply a loaner car/rental car for the team leader to use? (If applicable)
 YES NO
7. Can you make an office available for the team leader to use during the day? (If applicable)
 YES NO

If YES, where?

8. The Team will need a gym/fitness center to work out at while they are at your church. (Gold's Gym, Powerhouse, etc)
 Gym Name:
 Gym Contact Person:
 Gym Phone Number:

9. Please submit a signed copy of the Materials List, indicating that you have secured all materials for the crusade.

Please supply the names and phone numbers of the people responsible for each of the following aspects of the crusade:

	Leader Name	Phone Number
Stage Crew		
Materials		
Meals		
Transportation		
School Assemblies		
Counseling/Prayer		
Prayer Team		
Head Usher		

Signature: _____ Date: _____
 (If you're emailing this form, you can digitally sign it by typing your full name and the date in the above.)

Additional Comments/Other Necessary Information: