



ICCF Project/Event Request

Who is the primary organizer of the Project/Event: (check one)

<input type="checkbox"/> Executive Committee	<input type="checkbox"/> Hospitality and Culture Committee
<input type="checkbox"/> Outreach Committee	<input type="checkbox"/> Education Committee
<input type="checkbox"/> Youth Committee	<input type="checkbox"/> ICCF Staff

Title of Project/Event: _____

Date of Project/Event: _____ **Number of People attending:** _____

Food served: (please specify):

<input type="checkbox"/> Meal (breakfast / lunch / dinner)	<input type="checkbox"/> Hot / cold drinks
<input type="checkbox"/> Refreshments (dessert, fruit, cookies)	<input type="checkbox"/> Specify:

Specify the area you intend to use: (Check all that apply):

<input type="checkbox"/> Masjid	<input type="checkbox"/> Multi-Purpose Hall
<input type="checkbox"/> Library	<input type="checkbox"/> Playground / Children's reading room

Does it meet ICCF Objectives of Worship, Empower & Inspire? (Check all that applies)

<input type="checkbox"/> Fulfills worship / Strengthens faith	<input type="checkbox"/> Reaching out to Ethnic minorities
<input type="checkbox"/> Family Oriented	<input type="checkbox"/> Youth & Children
<input type="checkbox"/> Embracing Diversity & Interfaith Harmony	<input type="checkbox"/> Community Celebration
<input type="checkbox"/> Fundraising / increase charity	<input type="checkbox"/> Building / Strengthening Relations
<input type="checkbox"/> Educational: Islam & Muslims	<input type="checkbox"/> Increased Muslim's attendance at ICCF
<input type="checkbox"/> Other:	

Budgetary Cost of the Project: How will the event be funded? Check all that applies)

Expenses	Cost	Expenses	Cost
Food and Refreshment	\$	Cleaning Charges	\$
Facility Use	\$	Speaker/Performer Stipend	\$
Travel - Air/Car Rental /Hotel	\$	Printings / Advertisement	\$
Miscellaneous	\$	Total Cost	\$

How The Project Will be Funded: (Check all that applies)

<input type="checkbox"/> Committee Budget	<input type="checkbox"/> ICCF Main Budget
<input type="checkbox"/> Individual Donors	<input type="checkbox"/> Tickets
<input type="checkbox"/> Sponsorship (specify)	

Will How will you advertise the event? Check all that applies)

<input type="checkbox"/> Flyers / Posters	<input type="checkbox"/> ICCF Website & Email Bulletin
<input type="checkbox"/> Friday Prayers Announcement	<input type="checkbox"/> Telephone Calls
<input type="checkbox"/> Other (specify)	

Event / Project Approved By:

Approved by	Name	Date
Committee Chair		
ICCF Treasurer		
Chair: Board of Trustees		

Organizer must submit this form to ICCF staff at least two weeks prior to event. Organizer is responsible for checking the ICCF website for potential conflicts.