

# Synod Event Communications Form

## EVENT INFORMATION

Name of Event(s): \_\_\_\_\_

Date of Event(s): \_\_\_\_\_

Contact Person Name: \_\_\_\_\_

Contact Person Phone Number: \_\_\_\_\_

Contact Person Email Address: \_\_\_\_\_



## COMMUNICATION OPTIONS (tick where required):

Synews

Website Update

Synouncements

Coverage of Event

Facebook Status Update

Other

Facebook Event

Synews: highlights Synod and ELCA news and sponsored events | Synouncements: highlights events and job opportunities.

Information regarding other: \_\_\_\_\_



## TEXT

**Please insert the announcement text below. The synod reserves the right to edit material.**

Please insert information about your event here.

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## AUTHOR INFORMATION

Name of author: \_\_\_\_\_

Phone Number of author: \_\_\_\_\_

Email of author: \_\_\_\_\_

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*This form will be sent to Assistant to the Bishop for Mission Support and the Communications Assistant. Any further information should be sent to both with the subject "Synod Event Communications" to [nackerman@socalsynod.org](mailto:nackerman@socalsynod.org) and [cbassler@socalsynod.org](mailto:cbassler@socalsynod.org).*