



**COVENANT**  
UNITED CHURCH OF CHRIST

1130 E. 154th St.  
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## CUCC HOLIDAY BUDGET REQUEST - 2025

TODAY'S DATE: \_\_\_\_\_ DATE OF HOLIDAY PARTY: \_\_\_\_\_

MINISTRY/DEPARTMENT: \_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_

EMAIL: \_\_\_\_\_ MOBILE: \_\_\_\_\_

LOCATION OF CELEBRATION: \_\_\_\_\_  
(Name of Venue or Resident's Name)

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ TYPE OF VENUE: \_\_\_\_\_  
(Restaurant, Reception Hall, Home, Other, etc.)

COST OF HOLIDAY PARTY: \$ \_\_\_\_\_

WHAT IS COVERED BY THE COST?:

NUMBER OF MINISTRY PARTICIPANTS: \_\_\_\_\_ DEPOSIT REQUESTED: \$ \_\_\_\_\_

DEPOSIT DUE DATE: \_\_\_\_\_ BALANCE DUE DATE: \_\_\_\_\_

NUMBER OF ACTIVE MINISTRY MEMBERS: \_\_\_\_\_  
(Please attach a roster with email address and cell phone number of each active member.)

If holiday party cost exceeds church budget, please explain how you will cover the difference:

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_