



St. James Baptist Church
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PUBLICITY GRAPHIC DESIGN FORM

DATE SUBMITTED: _____

CONTACT PERSON: _____

MINISTRY: _____

CONTACT NUMBER(S): _____

EVENT: _____

DETAILS*: _____

1. PUBLICITY MINISTRY CONTACT: _____

COMPLETION DATE: _____

2. SUBMIT TO THE OFFICE FOR

- BULLETIN INSERTION
- BULLETIN BOARD
- DISTRIBUTED TO COMMUNITY CHURCHES WITH
A LETTER FROM PASTOR SYKES



The Contact Person is responsible for submitting the completed form to the Church Office, who will secure final approval

* - Please provide specific detail information **2-3 weeks prior** to the event to assist the Publicity Ministry in generating Graphic Designs.