

EVENT PLANNING WORKSHEET

Chairperson			Contact Information		
			Date		
			Time		
Location			Time		
APPOINTED COMMITTEE	MEMBERS				
Na	me	Contact Infor	mation		
1					
2					
3					
4					
5					
6					
7					
ECK WHEN COMPLETED					
K with insurance	☐ OK with PTA bud	get	☐ Program approved by unit		
eceived staff input	☐ OK with school calendar		☐ Funds allocated by unit		
lospitality arranged	☐ Volunteers confirm	med	 Handouts collected from non-participating service providers 		
arental permission slip	☐ Parking logistics		☐ Publicity materials		
☐ Developed	☐ Signage		☐ Developed		
☐ Duplicated	☐ Crossing gua	ards	□ Duplicated		
☐ Distributed	☐ Special requirements		☐ Letters/fliers to parents & staff		
valuation form(s)	☐ Flag		☐ PTA newsletter distributed		
☐ Developed☐ Duplicated☐	☐ Judges ☐ Custodian		☐ Press releases and/or Public Service Announcements (PSAs to media		

PROGRAM EXPENSES					
Facility use permit	\$	Custodian	\$	Refreshments	\$
Fliers	\$	Handouts	\$	Signs	\$
Postage	\$	Nametags	\$		\$

PUBLICITY					
Fliers	Due date	Newsletter articles	Due date	Media releases	Due date

EQUIPMENT & AUDIOVISUAL REQUIREMENTS						
Item	Quantity	Location	Item	Quantity	Location	

SPECIAL CONTACTS (JUDGES, SPEAKERS, SERVICE PROVIDERS)				
Name Contact Information				
1				
2				
3				
4				

NOTES		
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