



Event Planning Checklist

Event Title: _____

Today's Date: _____

Organization's Name: _____

Date & Day of Event: _____

Location: _____

Start & End Time: _____

Set up & Clean up Times: _____

Event's Purpose: _____

Sponsors/Co-Sponsors needs, wants & agreement:

Location: _____

Venue Booked: Yes No

1. Office Secretary Signature : _____

Account Name and Number: _____

Total Budget: _____

2. Accountant Signature: _____

Student Name and Organization Name: _____

Contact Info.: _____

3. Student Leader Signature: _____

Advisor present the entire event time: _____

Name & Contact Info.: _____

4. Advisor Signature: _____

Logistics

Layout/Design/Table set up:

Coordinator: _____

Contact Info.: _____

Chairs Needed Tables Needed

Special requests (canopy, stage, podium, etc.): _____

A/V request (projector, screen, P.A. system, cables, extension cords, etc.): _____

Custodians (2 weeks notice & over time required), \$1,000 average

Police (minimum 2 required on overtime, \$500 average

Activities Board or Outside Vendors: _____

