Event Planning Checklist

Fax: (650) 941-4574

Event Title:					
Today's Date:	Location:				
Organization's Name:	Venue Booked: Yes No				
Date & Day of Event:	1. Office Secretary Signature :				
Location:	Account Name and Number:				
Start & End Time:	Total Budget: 2. Accountant Signature:				
Set up & Clean up Times:					
Event's Purpose:	Student Name and Organization Name: Contact Info.:				
	3. Student Leader Signature:				
	Advisor present the entire event time:				
Sponsors/Co-Sponsors needs, wants & agreement:	Name & Contact Info.:				
oponsors co-oponsors needs, wants & agreement.	4. Advisor Signature:				
	gistics Coordinator: Contact Info.:				
Layout/Design/Table set up:	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:				

Marketing

Coordinator:	Start Date:
Contact Info.:	End Date (Date of Event):

***ASFC Design Center e³ Smart Shop (To use an outside vendor we require an Independent Contractor Packet from Kamara Tramble e³ Advisor - Volunteers not to sign) ***

Type of Advertising:	Yes	No	Start Date	End Date
Flyers/ Posters				
Website/ Facebook				
Flat Screens				
Classroom Announcements				
Event Arrows				
Banners				
Display Cases				
Black Stands				
Door Signs				
White Boards				
Special Requests (description):				

Food and Refreshments

Coordinator: Vendor:

Menu:

Contact Info: Required Health Permit: Yes No

Required Business License: Yes No

Reminder- no food cooked from home

Anticipated Attendance:

Supplies/Food (Napkins, Utensils, Plates, water, etc.)

Needed:

Available:

Entertainment

Coordinator: Entertainment:

Master of Ceremony:

Contact Info: DJ, Band, Singer, Dance Group, Guest Speaker

(Bio, Contact Info, and Reference List Required):

To use an outside vendor such as a caterer, entertainer or guest speaker, we require an Independent Contractor Packet from Accountant or Advisor - Volunteers cannot oversee. 4 weeks minimum and 3 months if it costs over \$1,000.

Decorations

Coordinator Name:	Theme (Table cloths, balloons, etc.):
Contact Info:	Needed Items:

Volunteers:		
Name & Available Times	Phone No. / Email	Club/Organization
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