



EVENT PLANNING WORKSHEET

PRIMARY EVENT INFORMATION	
Chairperson	Contact Information
Activity	Date
Location	Time

APPOINTED COMMITTEE MEMBERS	
Name	Contact Information
1	
2	
3	
4	
5	
6	
7	

CHECK WHEN COMPLETED

- OK with insurance
- Received staff input
- Hospitality arranged
- Parental permission slip
 - Developed
 - Duplicated
 - Distributed
- Evaluation form(s)
 - Developed
 - Duplicated
- OK with PTA budget
- OK with school calendar
- Volunteers confirmed
- Parking logistics
 - Signage
 - Crossing guards
- Special requirements
 - Flag
 - Judges
 - Custodian
- Program approved by unit
- Funds allocated by unit
- Handouts collected from non-participating service providers
- Publicity materials
 - Developed
 - Duplicated
 - Letters/fliers to parents & staff
 - PTA newsletter distributed
 - Press releases and/or Public Service Announcements (PSAs) to media