

Event Name: _____
 Date: _____
 Event Coordinator: _____
 Event Budget (pre & post): _____

Calendar Coordinator: _____
Facilities/Athletics: _____
Activities Coordinator: _____
Principal: _____

TASK	PERSON/DEPT RESPONSIBLE	FLOW/TIMING (i.e., how far in advance of the event will this occur)	DUE DATE	NOTES/COMMENTS
SAMPLE: Schedule Facility	Means	6 months prior	03/03/09	
Facilities				
Schedule on Calendar (check for conflicts)				
Setup				
Clean up				
Security (keys?)				
Sound System/Visual Aids				
Parking				
Publicity				
Mailing (invitations, fliers, etc.)				
Prepare mailing list				
E-mails				
Reader Board				
Posters				
Other Print Materials (programs, handouts, etc.)				
Ticket Sales/Money Handling/Processing				
Cats' Crew Involvement				
Parent Involvement				
Student Involvement				
Food/Refreshments				
Decorations				
Entertainment				
Gifts (if necessary)				
Photographer				
Thank You Notes (post event, if necessary)				