

EVENT PLANNING

Fillable Form: Resurrection Parish\SharePoint - Documents\Operations\Office Process\EVENT FORM fillable New Version

Date

Event Name: _____**Contact Person:** _____ **Phone No.:** _____**Staff Liaison Assigned:** _____**Organizing Group/Committee:** _____**Reserved Rooms:**

| | | | | | |
|--|---|---------------------------------------|--|----------------|-------------------------------------|
| Cafeteria | <input type="checkbox"/> Church | <input type="checkbox"/> Day Chapel 1 | <input type="checkbox"/> Day Chapel 2 | Gathering Area | <input type="checkbox"/> GA Kitchen |
| <input type="checkbox"/> Greeting Area | <input type="checkbox"/> FAC | <input type="checkbox"/> Family Room | <input type="checkbox"/> Parish Hall 1 | Parish Hall 2 | <input type="checkbox"/> POD |
| School | <input type="checkbox"/> Welcoming Center | | | | |

Calendars Required:

Master Calendar Event Calendar (Do not book setup/take down times on Event Calendar)

Number of people expected: _____**Date and time of event:** Date: _____ Start time: _____ Estimated end time: _____**Setup and take down time:** Setup: _____ Take down: _____**Registration Needs**Yes No Is registration needed? If yes will fee be charged? Yes No If yes how much? _____Registration to be done by (check all that apply): Paper WeShare Phone call**Audio/Visual**

| | | | |
|---|--------------------------------------|------------------------------------|---------------------------------|
| <input type="checkbox"/> Church AV | <input type="checkbox"/> Portable TV | <input type="checkbox"/> Projector | <input type="checkbox"/> Screen |
| <input type="checkbox"/> Gathering Area AV | <input type="checkbox"/> DVD Player | | |
| <input type="checkbox"/> Day Chapel AV | | | |
| <input type="checkbox"/> Welcoming Center AV: | | | |

Door unlock needs/Automated Lighting Timing Changes/Heating & Air Conditioning Requests

Exterior: Standard time: 15 minutes prior to event start time/15 minutes after scheduled event start time
Nonstandard door time - Start _____ to _____

| | | | |
|------------------------------------|-------------------------------------|--------------------------------------|-----|
| <input type="checkbox"/> WC Main A | <input type="checkbox"/> WC North A | <input type="checkbox"/> WC East | FAC |
| <input type="checkbox"/> WC Main B | <input type="checkbox"/> WC North B | <input type="checkbox"/> School East | |
| <input type="checkbox"/> WC Main C | <input type="checkbox"/> WC North C | <input type="checkbox"/> School Main | |

KEY ENTRY ONLY DOORS:

Main Church
 North Church
 South Church

Comments (who): _____

Interior: Door time - Start: _____ to _____

| | | | |
|-----------------|-------------------------|------------|--------------------------|
| WC Elevator | WC-School (upper level) | School/FAC | Automated Lighting Notes |
| School Elevator | WC-Cafeteria (lower) | Cafeteria | Heating or A/C Notes |

Hospitality needed (purchase order may be needed)

| | | | | |
|--|---|---|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Food will be served | The food will be: _____ | <input type="checkbox"/> Supplied by parish | <input type="checkbox"/> Catered | <input type="checkbox"/> Pot luck |
| <input type="checkbox"/> Coffee/Water | | | | |
| <input type="checkbox"/> Juice | | Parish Admin communicate with Kitchen Supply Person | | |
| Alcohol will be served | (complete Part C in Alcohol License 4 weeks prior. Click here for Alcohol License Form .) | | | |

Needed Supplies

| | |
|---|---|
| <input type="checkbox"/> Cash boxes <input type="checkbox"/> # needed | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Cash collection bags | <input type="checkbox"/> Paper flip board |
| <input type="checkbox"/> Easel | <input type="checkbox"/> Pencils |
| <input type="checkbox"/> Laptop computer | <input type="checkbox"/> Petty cash/starting cash-ck request required-allow 3 wks |
| <input type="checkbox"/> Markers | <input type="checkbox"/> Note paper |
| <input type="checkbox"/> Microphone | <input type="checkbox"/> White board |

Room Setup - Please diagram on reverse side or separate sheet if special setup

| | |
|---|--|
| <input type="checkbox"/> Regular setup (nothing needed) | <input type="checkbox"/> Round tables <input type="checkbox"/> # |
| <input type="checkbox"/> Special setup (see setup instructions) | <input type="checkbox"/> Long tables <input type="checkbox"/> # 8 ft <input type="checkbox"/> # 6 ft |
| | <input type="checkbox"/> Chairs <input type="checkbox"/> # |

Event Name _____

Guest Speaker: _____

If compensated-W-9 completed (must be completed prior to ck processed) Check request completed (allow 3 wks)
 Recording Event Media Release form signed Approved by Diocese

Staffing Needs - Please continue names and list responsibility on separate sheet if needed

Audio/visual equipment Who: _____
 Chair Persons (i.e.; treasurer, take down, cashiers, cooks, etc) _____

Chaperones Who: _____

Childcare Who: _____

Photographer Who: _____

Drivers Who: _____

Other Who: _____

Type of Event (check all that apply)

Fundraiser (Fund Raising Request form needed)

Committee/organization meeting

Community developing/growing

Involves children (See Parish Admin. Assist Re: LoSec needs)

Educational

Liturgical

Musical (Is performance/copy right license in place?)

Rental (Facility Usage Agreement needed)

Movie (Is performance/copy right license in place?)

Other _____

Marketing/Advertising/Presentation/Printed Material (Media preparation) - Admin staff involved in planning

Marketing/Advertising:

Who is responsible for graphics if needed? _____

Who is responsible for content? _____

Who has final approval? _____ Date to be completed by: _____

Where to promote? (Mass announcements will be coordinated by the liturgist.)

Web Bulletin Church stand Newsletter Facebook E-mail Church Screen
Twitter Compass Yard Signs Libal Sign Other _____

Presentation/Programs:

Who is responsible for preparing presentation? _____

Power Point DVD Handout Other _____

Who is responsible for preparing program? _____

Who has final approval? _____ Date to be completed by: _____

Printed material:

Who is responsible for formatting and/or printing material? _____

Registration sign up form Programs # needed Presentation handouts # needed
 Name Tags Invitations Other _____

Check complete as needed:

Purchase Order(s) W-9
 Check Request(s) Calendars
 LoSec
 Fund Raising Request Form
 Facility Usage Agreement

Office Use- Distribution list as needed

Bookkeeper
 Business Manager/Dev. Dir.
 Communication Coordinator
 Maintenance
 Parish Administrative Assistant
 Receptionist
 Staff Liaison in charge of event

Draw/describe special setup