

Event Planning Checklist

Event Name: _____ Coordinator: _____

Event Date: _____ Starting Time: _____ Ending Time: _____

Event Location: _____

<i>Function</i>	<i>Yes</i>	<i>No</i>	<i>Function Coordinator</i>	<i>When</i>	<i>Where</i>
Publicity					
Posters					
Post Cards					
Flier Distribution					
Bulletin / AV					
Refreshments					
Setup					
Decoration					
Clean Up					

Notifications		Supplies			Oldham Era
Who	When	Type	Amount	Who	
Pastor		Plates			Courier Journal
Custodian		Napkins			
AA		Cups (cold)			WJIE
Boy Scouts		Cups (hot)			
ESL		Utensils			WHAS
Hispanic Bible		Table Cloths			
SWC		Garbage bags			Caterer:
Mom's Group		Cleaning			
Caterer		Bathroom			
		Coffee			
		Tea			
		Condiments			

Other needs and notes: