



Event Planning



EVENT OVERVIEW

Event name: _____

Type: _____

Date: _____

Time: _____

Duration: _____



EVENT TIMELINE

____:____ - _____

____:____ - _____

____:____ - _____

____:____ - _____

____:____ - _____

____:____ - _____



KEY TASKS

☐ _____

☐ _____

☐ _____

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☐ _____

☐ _____



RESOURCES NEEDED

Equipment: _____

Supplies: _____

Staff/Volunteers: _____



KEY CONTACTS

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Target attendance: _____ Budget: \$_____ Success criteria: _____