



EVENT NAME

**PRE
EVENT**

Event Chairperson(s)

**Returning to this position
next year?**

EVENT DATE

Main Contact:

yes no

(phone)

yes no

EVENT TIME

yes no

yes no

EVENT LOCATION

Requested # of volunteers

Requested # of student volunteers

Anticipated # of participants

Current # of participants

Sign-up Form Created?*

(Use Operations Manual and last year's Post Event form for reference)

Venue Booked?

(If applicable)

Estimated Expenses

Info Distributed?

(Flyer created, etc.)

Current status?

On target

Under budget

Additional Event Staff Secured?

(ie: deejay, caterer, etc.)

Over budget

Supplies Purchased?

How can your PTG Board representative assist you?

(Reminder: Do not contact administration directly, with requests. For consistency, the PTG board will act on your behalf.)

Current Roadblocks

Notes on Event Set-Up

**Notes on Running
the event**

* [Completed sign-up sheets must be printed and brought to event for volunteers to initial at report time.](#)
Please email this completed form to the PTG secretary or print & bring to the next meeting.