

Special Event Planner



Event Name: _____

Co-ordinator: _____

Date: _____ Time: _____

Location: _____

Event Objective(s): Fundraising Awareness/Education Morale

Additional Event Details:

Resources Required: (# of volunteers, total volunteer hours, equipment and supplies, refreshments)

Budget:

| Item | Cost |
|--------------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| Total | \$ _____ |

Results

\$ _____ Dollars Raised (*if applicable*)
\$ _____ Event Expenses (*if applicable*)
\$ _____ Net Result

of Participants: _____ # Volunteers: _____ Total Volunteer Time: _____

Comments and Recommendations for Next Year's Event

