

MUCKLESHOOT TRIBE

EVENT PLANNING WORKSHEET FORM

This form is to be filled out by who in the tribe has the budget authority to pay for a tribally sponsored event and then turn this form in to the Events Coordinator a minimum of four weeks in advance of the planned event.

Name: _____

Address: _____

Phone-
WK# _____ **Cell#** _____

Signature: _____

Date turned in to Event

Coordinator: _____

Signature Event Coordinator: _____

Date: _____

Name of Event:

Date:

Location:

Is facility coordination required : _____ **Yes** _____ **No** _____

If yes, who is Point of Contact for facility? _____

Start Time: _____ ~ End Time: _____

Purpose:

Who is the Event Coordinator contact that will be in charge of event:

Name: _____

Phone: _____

Is help from the Event Coordinator Requested? _____ **Yes** _____ **No** _____

What help do you want from the Event Coordinator? Be

Specific: _____

Number of Guests:

Proposed Budget #:

Event Space:

Rental Fee for Space:

Insurance:

Décor:

Staff:

Event Coordinator:

Who has budget signing authority?

Who is in charge on site?

Please name volunteers and their contact information: _____

Committee:

Security:

Clean-UP Staff/Contractor:

Food and Beverages:

Caterer's Menu:

Special Dietary Needs:

Ice:

Invitations:

Printing:

Equipment Rental:

Tables:

Chairs:

Linen:

Miscellaneous:

Entertainment:

Band or Musicians:

Entertainers:

Disc Jockey:

Wiring or Sound System:

Publicity:

Printing:

Postage:

Photographer:

Incidentals:

Name Tags:

Place Cards:

Favors:

Gift Bags:

Miscellaneous:

Total Sales Tax:

Service Charges:

Tips: