



DIGNITAS

EVENT PLANNING CHECKLIST

Use this tool to make sure you have thought about your event and the planning involved. It is a generic checklist, so all questions may not apply. However, it is a good way to avoid missing any little details, which, when overlooked, can negatively impact your program.

Prior to Event:

- Yes No Have you identified the purpose of the event (social, recruitment, educational, service, recreational)?
- Yes No Have you secured funding sources?
- Yes No Have you identified your target audience? (How many do you expect? Is attendance open, restricted, for members and guests?)
- Yes No Have you reserved an adequate facility? (Is it appropriate to the anticipated attendance? Is it reserved for the proper amount of time?)
- Yes No What kind of set-up will you need? (Will you need chairs, tables, special set-up, special equipment? Have the necessary arrangements been made?)
- Yes No Will food be served? Has food been ordered?
- Yes No Is security needed? Have arrangements been made for adequate supervision?
- Yes No Have you properly publicized your event? (You should start at least two weeks ahead with advertisements, PSA's, flyers, posters, news releases, etc.)
- Yes No Are you sending out invitations? (They should go out at least two weeks prior to the event.) Do you need name tags and/or tickets?
- Yes No Have committees been formed and duties assigned? (Possible committees include planning, shopping, decorations, publicity, entertainment, invitations, hospitality, servers, and set-up and clean-up.)



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On the Day of the Event:

- Yes No Has the facility and set-up been checked?
- Yes No Have supplies been checked? (Name tags, food, etc.)
- Yes No Have you re-confirmed that workers will carry out their assignments?
- Yes No Have you thanked everyone involved?
- Yes No Have all funding forms been completed and submitted as required by your funding source? Have you collected invoices/receipts for financial tracking purposes?

After the Event:

- Yes No Has a program evaluation been completed?
- Yes No Have thank-you letters been sent when appropriate?
- Yes No Have all bills been paid?
- Yes No Have planners of the event gotten together to discuss how everything went, and made suggestions for improvement?



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Event Planning

EVENT TITLE: _____

DATE: _____

Group or Person Responsible for this event: _____

Phone Number: _____

Email: _____

Brief Description of Event:

Goal(s) of the Event: (What do you hope to accomplish?)

1.

2.

Objectives: (How do you intend to accomplish your goal(s)?)

1.

2.

3.

How will you know if your goals/objectives were met?



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Post Event Evaluation

Event Title: _____

List your initial objectives:

Were they achieved?

If a fundraiser, Amount of funds raised: _____

Number of people engaged: _____

Rate the following from 1 (needs significant improvement) to 4 (high capacity):

Activity: _____	Rating	Comments
Planning		
Chapter communication		
Event Execution		
Follow-up Activities		

Should this event be repeated?

If yes, list best practices:

If no, please list reasons why: