



St. Paul Missionary Baptist

Event Planning Checklist

Event _____ Date _____ Time _____

Purpose/For _____ Approx. Attendance _____

Person in charge _____ Phone _____ Email _____

Facilities Needed

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Sanctuary | <input type="checkbox"/> Fellowship Hall |
| <input type="checkbox"/> Nursery | <input type="checkbox"/> Ecclissea Room |
| <input type="checkbox"/> Kitchen | |
| <input type="checkbox"/> Other _____ | |

Equipment Needed

- | | |
|---|---|
| <input type="checkbox"/> Sound System | <input type="checkbox"/> Overhead Projector |
| <input type="checkbox"/> Easel | <input type="checkbox"/> Tape Recorder |
| <input type="checkbox"/> VCR | <input type="checkbox"/> Kitchen Equipment |
| <input type="checkbox"/> DVD player | <input type="checkbox"/> PC Projector |
| <input type="checkbox"/> Tables ? _____ | <input type="checkbox"/> Chairs? _____ |
| <input type="checkbox"/> Other _____ | |

Ministry Support

- | | | | |
|--------------------------------------|----------------------------------|--|---|
| <input type="checkbox"/> Usher | <input type="checkbox"/> Bus | <input type="checkbox"/> Deacons/Deaconess | <input type="checkbox"/> Kitchen |
| <input type="checkbox"/> Audio | <input type="checkbox"/> Finance | <input type="checkbox"/> Men's | <input type="checkbox"/> Finance |
| <input type="checkbox"/> Video | <input type="checkbox"/> Music | <input type="checkbox"/> Women's | <input type="checkbox"/> Choir <u>Men's</u> |
| <input type="checkbox"/> Other _____ | | | |

Advertise and Publicize

- | | | |
|--|--|---|
| <input type="checkbox"/> Post in Church Bulletin | <input type="checkbox"/> Create Flyers | <input type="checkbox"/> Post on Church Web Page |
| <input type="checkbox"/> Advertise on Radio (KWRB) | <input type="checkbox"/> Sierra Vista Herald | <input type="checkbox"/> Create Poster for Bulletin Board |

Preparation and Cleanup of Facilities

- | | |
|---|--|
| <input type="checkbox"/> Coordinate Support to Set up the facility
(ID Set Up Staff) | <input type="checkbox"/> Coordinate Support to Cleanup Facility
(ID Cleaning Staff) |
| <input type="checkbox"/> Coordinate Support to Breakdown Equipment | <input type="checkbox"/> Coordinate for Access to Facility (Pickup Key) |
| <input type="checkbox"/> Coordinated for Access to Facility (Turn in Key) | |

Note: When ever possible, seek recommendations of last years event coordinator.
Check for after action report or other items which documented last years event

Person Requesting _____ Date _____