

OFFICE CONTACT PERSON:

EVENT SHEET

NAME OF EVENT:

CONTACT PERSON OFFSITE:

PHONE NUMBER:

DATE :

TIME :

LOCATION:

RESERVATIONS NEEDED:

YES:

NO:

DATE NEEDED:

SPEAKER:

TRAVEL ARRANGEMENTS:

DRIVING:

FLYING:

PICK UP PERSON IF NEEDED:

MOTEL ARRANGEMENTS:

CONFIRMATION # :

HONORARIUM:

YES :

AMOUNT:

DATE NEEDED:

NO :

WHO WILL INTRODUCE:

ROOM ARRANGEMENT:

OF CHAIRS :

OF TABLES:

OTHER:

MEAL: NO:

AMOUNT:

CHECK NEEDED BY:

MENU:

OTHER:

NEEDED EQUIPMENT:

SIGN UP SHEETS NEEDED:

YES:

NO:

PROGRAM NEEDED:

YES:

NO:

PERSON RESPONSIBLE FOR PROGRAM:

EVALUATION SHEETS NEEDED:

YES:

NO: