

# ABIDING TRUTH MINISTRIES, INC.

501(c)(3)

## Event Planning Checklist

ATM CDC

<b>Event Name:</b>		
<b>Contact Name:</b>	<b>Phone Number:</b>	<b>Email:</b>
<b>Event and Related Dates</b>		
<input type="checkbox"/> One time event	<i>Date/Time:</i>	
	<i>Confirmed Key Holder:</i>	
<input type="checkbox"/> Repeating event	<i>Days (i.e. Mon, Wed, etc.)/Dates</i>	
	<i>Times (i.e. 6pm):</i>	
<input type="checkbox"/> Staff/Volunteer Meetings	<i>Dates/Times:</i>	
	<i>Confirmed Key holder(s):</i>	
<input type="checkbox"/> Room(s) Decoration	<i>Dates/Times:</i>	
	<i>Confirmed Key Holder:</i>	
<b>Event Funding</b>		
<b>Expected cost for this event?</b>	\$ _____ . _____	<input type="checkbox"/> No cost
<b>How do you plan to finance it?</b>		
<input type="checkbox"/> Fundraising	<i>Please specify &amp; submit fundraiser approval form:</i>	
<input type="checkbox"/> Fee for event or program	<i>Specify cost per person and who will collect fee?</i>	
<input type="checkbox"/> Ticket sales	<i>Who is handling tickets &amp; sales money?</i>	
<input type="checkbox"/> Church Budget funding	<i>Date Requisition(s) Submitted to office:</i>	
<input type="checkbox"/> Other	<i>Please specify:</i>	

**What facilities/ministry services will be needed?**

<b>Event Location:</b>		
<input type="checkbox"/> Church Rooms	<i>Room(s) booked:</i>	
<input type="checkbox"/> Sound Equipment	<i>Confirmed Media Ministry Staff:</i>	
<input type="checkbox"/> Bus or van	<i>Confirmed Driver:</i>	
<input type="checkbox"/> Video Equipment	<i>Equipment needed:</i>	
<input type="checkbox"/> Childcare	<i>Confirmed Childcare staff:</i>	
<input type="checkbox"/> Room set-up	<i>Confirmed Facilities Mgt Staff:</i>	
	<i>Room(s) set-up date:</i>	
<input type="checkbox"/> Tables	<input type="checkbox"/> Long - # _____	<input type="checkbox"/> Round - # _____
<input type="checkbox"/> Chairs	<input type="checkbox"/> Green -# _____	<input type="checkbox"/> Gray - # _____
<input type="checkbox"/> Kitchen/Hospitality	<i>Confirmed Food Service Lead:</i>	
<input type="checkbox"/> Office services (printing...)	<i>Date materials sent to office:</i>	

**How do you plan to promote it?**

<input type="checkbox"/> ATM Church	<input type="checkbox"/> Sunday Bulletin <input type="checkbox"/> Sunday Announcement <input type="checkbox"/> Resource Tables ( <i>Foyers</i> ) <input type="checkbox"/> Website <input type="checkbox"/> Flyers <input type="checkbox"/> Signs, posters, banners	<i>Advertisement Request Form Submitted:</i>  ____/____/____
<input type="checkbox"/> Electronic Evite ( <i>text/email invitation</i> )	<input type="checkbox"/> Newsletter	<input type="checkbox"/> Written Invitations
<input type="checkbox"/> Newspaper ( <i>newspaper items must be cleared through main office.</i> )	<i>Which newspaper(s):</i>	
<input type="checkbox"/> Other	<i>Please specify:</i>	