

SRTMS PTA EVENT PLANNING WORKSHEET

Name of Event/Committee: _____

Primary Event Information

Contact information:

| | |
|----------------|------|
| Chairperson(s) | |
| PTA VP | Date |
| Location | Time |

Planning Committee Members

| Name | Email Address | Phone Number |
|------|---------------|--------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |

Volunteers

| Name | Email Address | Phone Number |
|------|---------------|--------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| 9. | | |
| 10. | | |
| 11. | | |
| 12. | | |

(Add additional sheet, if needed)