

School name
Teacher name

Event Planner

Event Information

Date: _____	Number of People: _____
Time: _____	Occasion: _____
	Location: _____

Cost

Budget

Per Person: _____	Total Revenue: _____ \$0.00
Total: _____ \$0.00	Cost per Ticket: _____
	Total Budget: _____

Expenses

Food Total: _____ \$0.00	Decorations Total: _____ \$0.00
Food 1 _____	Decorations 1 _____
Food 2 _____	Decorations 2 _____
Food 3 _____	Decorations 3 _____
Food 4 _____	Decorations 4 _____
Beverage Total: _____ \$0.00	Admissions Total: _____ \$0.00
Beverage 1 _____	Tickets _____
Beverage 2 _____	Security _____
Beverage 3 _____	Staffing _____
Beverage 4 _____	
Music Total: _____ \$0.00	Miscellaneous Total: _____ \$0.00
DJ _____	Misc 1 _____
Band _____	Misc 2 _____
	Misc 3 _____
	Misc 4 _____
	Misc 5 _____
Marketing Total: _____ \$0.00	Misc 6 _____
Invitations _____	Misc 7 _____
Posters _____	Misc 8 _____
Newspaper _____	