

Event Logistics Planning Sheet

Event Name

Date

Time

Venue/Location

Coordinator(s)

Task Checklist

<input type="checkbox"/>	Task	Person Responsible	Deadline	Notes
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>

Attendees & Participant List

Name	Role/Group	Contact Info	Special Notes
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>
<div></div>	<div></div>	<div></div>	<div></div>

Supplies & Equipment Checklist

<input type="checkbox"/>	Item	Quantity	Source	Notes
	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>
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Additional Notes

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