



EVENT COORDINATING

Event Type:

Event Date:

Name:

Event Time:

Email:

Guest Count:

Number:

Section:

Main POC for event if it's not the coordinator and contact:

Backup contact information:



VENDORS

<i>Name</i>	<i>Type (Music, Caterer, Restrooms, etc.)</i>	<i>Contact Info</i>	<i>Drop off Time</i>	<i>Pickup Time</i>	<i>Drop off and Pickup Location</i>

Waste and electrical needs:

Water access and any other requirements:

Will you be using our 2 mobile bars, or will the bartending service be providing these?

TABLES AND CHAIRS

<i>Vendor and Contact Info</i>	<i>Table Type (Standard or pub style, etc.)</i>	<i>Table Count</i>	<i>Locations</i>	<i>Drop off Time</i>	<i>Setup Time</i>

Responsible party for clean-up (Garden Room or Party Host)

