

# Churchville Chili Middle School PTO Event Summary

Name of Event: \_\_\_\_\_

Chairperson of Event: \_\_\_\_\_

Date & Time of Event: \_\_\_\_\_

Number of Volunteers needed: \_\_\_\_\_

Supplies needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Rooms/Building being used: \_\_\_\_\_

\_\_\_\_\_

Equipment needed: \_\_\_\_\_

\_\_\_\_\_

Event planning schedule (dates):

PTO request for Funds: \_\_\_\_\_

Guest speaker/vender/etc. contacted: \_\_\_\_\_

Rooms/Building/Equipment Requested: \_\_\_\_\_

Supplies ordered/purchased: \_\_\_\_\_

Volunteers requested: \_\_\_\_\_

PTO update: \_\_\_\_\_

Misc: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Name of Event:** \_\_\_\_\_

Changes, if any, in setup for following year:

Changes, if any, in running of event:

Changes, if any, in closing of event for next year:

Were the number of volunteers adequate?

What procedures in planning the event should remain in place for following year?

What was your opinion on how the event went?

What were your concerns on how the event was setup?

What were your concerns on how the event was run?

Problems with location, equipment, supplies?

Positive feedback on how the event went from set-up through to end?