

Event Planning Form

Today's Date _____

Event Date _____

Event Location _____

Event Time _____

Event Title _____

Organizing Group _____

Primary Student Contact Name and Email _____

Detailed Description of Event _____

Anticipated Attendance Number _____

Event Start Time (including set up time) _____

Event End Time (including clean up time) _____

Will there be food provided? _____

Who will provide the food? _____

Event already requested in EMS? Yes No

Assistance needed from our office? _____

Questions? _____

Type of Event

Supplies

PPE: Face Coverings

PPE: Gloves

Hand Sanitizer

Sanitizing Wipes

Directional Signage (arrows, enter/exit)

Tape/Items to create space parameters

Temperature Scanner

ID Scanner/Sign In Sheet

Event Procedures

Specific to all meetings and events:

Room Setup allows for physical distancing

- Physical distancing requirements identified
- Masks provided to attendees
- Clean room and equipment between sessions/rotations
- Separate entrance and exit doors
- Ask for COVID symptoms at entrance
- Communication of safety plan provided to attendees
- Attendance information submitted

Additional event procedures:

- Space created for presenter(s)
- If presentation/concert, front 12 feet of room roped off
- Masks/gloves provided to individuals working event
- Crowd control/ushers to encourage physical distancing
- Language on ticket/at entrance of liability release
- One-way aisles created and clearly marked

Accessibility

- ASL interpreters, closed captioning, screen readers
- Accessible entrance and exit
- Hybrid option or virtual

Training

- Event contact has received safety protocol training
- Event staff have been briefed on protocols
- Event responsibilities have been assigned
- Event staff understand what to do if safety procedures not followed