

EVENT PLANNING SHEET

School/Scout: _____

Teacher/contact person's Name: _____

Telephone: _____

Date _____ From _____ To _____

Theme (usually 1-3 words): _____

Topic-Presenters

1. _____
2. _____
3. _____
4. _____
5. _____

Objective(s):

1. At the end of this lesson, students will _____
2. At the end of this lesson, students will _____
3. At the end of this lesson, students will _____

Who's the audience?

Age group(s): _____

Number: _____

Special needs: Yes/No

Site (school/camp/park, etc.): _____

Setting (in/out doors, morning/afternoon/evening, weekday/weekend):

How many volunteers will there be?

What does the audience already know about the topic you are presenting?

Agenda (How will you address the 4 learning styles: visual, aural, analytical, and kinesthetic?)

What materials will you need?

Activity Materials	Where can you get these materials?
Site/management materials (drinking water, first aid kit, etc.)	Where can you get these materials?