

Pre-Event Planning Guide



Title of Event/Activity:				
Individual(s)	Responsibl	e for Coordinating Ev	ent:	
			(Nar	me)
Position		Email	Phone Number You Can Be Reached at Event	
			(Nar	me)
Position Email		Phone Number You Can Be Reached at Event		
Event:			Event Occu	ırrence:
☐ County ☐ State		☐ State	☐ New Event (First Time)	
☐ Multi-Count	y (District)	☐ National	☐ Reoccurri	ng
Type of Event/Activity:			Scheduled Date(s) of Event/Activity:	
☐ Fundra	iser		Start	 End
☐ Retreat/End of Year Trip				
☐ Competition		Scheduled Time(s) of Event/Activity:		
☐ Conference/Seminar				
☐ Social Program			Start	End
☐ Program ☐ Camp School Enrichment		Location(s) of Event (Activity)		
☐ Camp School Enrichment☐ Organized 4-H Club		Location(s) of Event/Activity: Primary:		
☐ After-School Program		Primary.		
☐ Special Interest Classes/ Clinics			Backup:	
☐ Other			(In Case of Weather)	
Number of Youth Attending:			Number of Adults Attending:	
			ember you must have a 10:1 ra	

How does this event/activity promote the mission of the 4-H Club:

Provide a brief description of the event/activity that you are planning(List all possible activities youth will be engaging in):