

# Event Planning Checklist

Page 1 of 2

**Special Olympics**  
Texas



Submit form to your Program/Area Director for every event.

If the event is an event in which the public participates, a participant release of liability is needed. Please contact the Vice President of Shared Services (vp\_hradmin.chp@sotx.org) to coordinate further.

| EVENT PLANNER INFO     |              |
|------------------------|--------------|
| Person submitting form | Today's date |
| Phone                  | Email        |

| EVENT INFO   |  |   |
|--|--|---|
| Name of the event  |  |   |
| Date(s) of the event   |  |   |
| Location of the event  | Area   |   |
| What type of event is it? (e.g. gala, golf tournament, product sales)  |  |   |
| How are funds raised? <i>(Check ALL that apply.)</i><br><input type="radio"/> Registrations/Participant Fundraising <input type="radio"/> Donations <input type="radio"/> Ticket Sales <input type="radio"/> Auction Item Sales<br><input type="radio"/> Sponsorships <input type="radio"/> Merchandise Sales <input type="radio"/> In-Kind Services/Goods (Value: \$ _____)   | Fundraising Goal: \$                               |   |
| Anticipated Expense Types <i>(Check ALL that apply.)</i><br><input type="radio"/> Facility Rental (venue, tables/chairs, security, sound system, etc.)<br><input type="radio"/> Decorations (table centerpieces, lighting, signage, etc.)<br><input type="radio"/> Food/Drink (caterer, gratuities, etc.)<br><input type="radio"/> 3rd Party Contractor<br><input type="radio"/> Entertainment (musicians, auctioneer, appearance fees, travel, etc.)<br><input type="radio"/> Awards/Prizes (purchased auction items, sponsorship recognition, "swag bags" for participants, volunteers, sponsors, gift cards, etc.)<br><input type="radio"/> Printing (paper, merchandise, etc.)<br><input type="radio"/> Miscellaneous (insurance, permits, credit card fees, etc.)<br><input type="radio"/> Other: | Total Anticipated Expenses: \$                     |   |
|  |  | Anticipated NET Income: \$<br><i>(Subtract total anticipated expenses from fundraising goal. DO NOT include in-kind values in your total anticipated income.)</i> |
| Is there a brochure, flyer, poster and/or letters that will be sent/distributed to invitees/public?  | <input type="radio"/> Yes <input type="radio"/> No |   |
| Is the event sponsored and/or put on by SOTX (SOTX controls all aspects of the event)?   | <input type="radio"/> Yes <input type="radio"/> No |   |
| Is the event a 3rd Party event (3rd Party controls the event, and puts on the event to benefit SOTX? SOTX staff/volunteers may still assist with various aspects of the event.)  | <input type="radio"/> Yes <input type="radio"/> No |   |
| If the event is a 3rd Party event, has the 3rd Party secured insurance to cover the event?   | <input type="radio"/> Yes <input type="radio"/> No |   |
| If the event is a 3rd Party event, will the 3rd Party and/or venue where the event is being held, add Special Olympics, Inc. and Special Olympics Texas, Inc. as additional insured under their general liability and liquor liability policies?   | <input type="radio"/> Yes <input type="radio"/> No |   |
| What was the 3rd Party's or venue's response to your request to name both entities as additional insured under their general liability and/or liquor liability policies?   | <input type="radio"/> Yes <input type="radio"/> No |   |
| If "yes" to the above, please submit documentation to Shared Services ASAP!<br>If "no" to the above, please indicate how, when and to whom was the request to be named as additional insured made:<br>How: _____<br>Phone: _____ Email: _____<br>Mailing Address: _____<br>When (Date): _____ Who (including title): _____<br>If you have their "negative" response in writing/email, please attach.   |  |   |

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Page 2 of 2



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| Will alcohol be served at the event?   | <input type="radio"/> Yes <input type="radio"/> No |
| Who will serve the alcohol?  |  |
| What types of alcohol will be served? <input type="radio"/> Beer <input type="radio"/> Wine <input type="radio"/> Mixed Drinks   |  |
| Is the alcohol <input type="radio"/> Purchased <input type="radio"/> Donated by:   |  |
| Is the alcohol being sold? (If "drinks" are included in the price of a "ticket", the alcohol is being sold.)   | <input type="radio"/> Yes <input type="radio"/> No |
| If there is a charge for the alcohol, who receives the proceeds?   |  |
| Is the alcohol being given away?   | <input type="radio"/> Yes <input type="radio"/> No |
| Will there be entertainment at the event?  | <input type="radio"/> Yes <input type="radio"/> No |
| If there is entertainment, what type of entertainment? (e.g., band, performers, etc.)  |  |
| Is there a contract for the facility, hotel, vendor(s), audio/visual?<br><b>DO NOT SIGN ANY CONTRACTS/AGREEMENTS PRIOR TO THE CONTRACT BEING REVIEWED AND APPROVED BY THE VICE PRESIDENT OF SHARED SERVICES.</b>           | <input type="radio"/> Yes <input type="radio"/> No |
| What are the insurance requirements stipulated in the contract(s)?   |  |
| SOTX has a no guns/weapons policy. The facility is <input type="radio"/> Public <input type="radio"/> Private<br>If the facility is private, will the facility honor SOTX's no guns/weapons policy?                        | <input type="radio"/> Yes <input type="radio"/> No |
| Is food being served at the event?   | <input type="radio"/> Yes <input type="radio"/> No |
| If food is being served at the event, who is serving the food?   |  |
| If the food or alcohol is being served by a hotel, have you requested that the hotel name Special Olympics, Inc. and Special Olympics Texas, Inc. as additional insured under their General Liability and Liquor policies? | <input type="radio"/> Yes <input type="radio"/> No |
| Will this event require a participant Release of Liability form?<br>If "yes," when did you contact Shared Services? Date: _____  | <input type="radio"/> Yes <input type="radio"/> No |
| Are there agreements with co-sponsors?   | <input type="radio"/> Yes <input type="radio"/> No |
| Will you need security and/or crowd control at the event?  | <input type="radio"/> Yes <input type="radio"/> No |
| If you need security/crowd control, who will provide the service?  |  |
| If there is a registration/ticket fee for the event, to whom will the checks be written?   |  |
| Is there a silent auction at the event?  | <input type="radio"/> Yes <input type="radio"/> No |
| If there is a silent auction, who will conduct the auction?  |  |
| Is there a live auction at the event?  | <input type="radio"/> Yes <input type="radio"/> No |
| If there is a live auction, who will conduct the auction?  |  |
| Will SOTX volunteers be "working" the event?   | <input type="radio"/> Yes <input type="radio"/> No |
| If there will be SOTX volunteers "working" the event, are they registered volunteers?  | <input type="radio"/> Yes <input type="radio"/> No |
| Is the event sponsored by SOTX/Law Enforcement Torch Run officials?  | <input type="radio"/> Yes <input type="radio"/> No |
| Has anyone asked for SOTX's tax identification number or for a copy of SOTX's 501(c)(3) form?<br><b>(Please coordinate with Sr. Development Director – Events prior to giving out either form.)</b>                        | <input type="radio"/> Yes <input type="radio"/> No |
| Additional Notes   |  |

**IMPORTANT REMINDER:** If your event includes activities that are excluded from SOTX insurance coverage (refer to the Special Olympics Corporate Insurance Policy in Section H), please contact your area development director. Even though there are exclusions contained in the Special Olympics Corporate Insurance Policy coverage, they may be deemed eligible for coverage if certain underwriting requirements are met and approved by SOTX prior to the event.