

# EVENT MANAGEMENT PLAN

## 1. EVENT DETAILS

### 1.1 Event Place and Time

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

Address of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Venue: \_\_\_\_\_

How the event will run / Details of all activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated number of attendees: \_\_\_\_\_

Date and Time of Set Up: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Start / Finish Time of Public Event: \_\_\_\_\_

Date and Time of Break Down: \_\_\_\_\_

### For Multi-Day Events Only

	<b>Gates Open</b>	<b>Gates Close</b>
Day 1:	_____	_____
Day 2:	_____	_____
Day 3:	_____	_____
Day 4:	_____	_____
Day 5:	_____	_____
Day 6:	_____	_____

1.2 **Contact During the Event / Event Chair**

Event Chair: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**2. ORGANIZING COMMITTEE**

**Sample Committee List** (Different types of Events will require different Committee Functions and Expertise):

Fundraising Committee Chair:	Committee Members: (To Include Treasurer)
Marketing Committee Chair:	Committee Members:
Facilities Committee Chair:	Committee Members:
Entertainment Committee Chair:	Committee Members:

### 3. FINANCIAL PLANNING

#### 3.1 Sample Budget for an Event or Festival

<b>CASH REVENUE</b>	<b>DESCRIPTION</b>	<b>ESTIMATED</b>	<b>ACTUAL</b>
Presenting Sponsor			
Entertainment Sponsors			
Patron Sponsors			
Grants			
Poster & T-Shirt Sales			
Food Sales			
Ticket Sales			
Event Registration Application Fees			
	<b>Total Cash Revenue</b>		
<b>EXPENSES</b>	<b>VENDOR NAME</b>	<b>ESTIMATED</b>	<b>ACTUAL</b>
<b>Marketing &amp; Promotion</b>			
<b>General</b>			
Billboards			
TV / Radio			
Web Design			
Collateral Design (Program, Posters, T-shirts, Banners, Sticker, etc)			
Photographer			
<b>Ads Published</b>			
Full Color Ad			
Newspaper Ads			
Newspaper Online Ads			
<b>Printing</b>			
Sponsor Packets Design & Printing			
Program Printing			
11x17 Posters Printing			
3.5x5 Handbills			
Invitations			
Miscellaneous Marketing			
	Subtotal		
<b>Event Management &amp; Setup</b>			
Table and Chairs			
Stages & Sound			
Portable restrooms (6)			
Electric for Food Vendors			
	Subtotal		
<b>Event Supplies</b>			
Map Boards			

Trash Boxes			
Water			
Lanyards			
	Subtotal		
<b>Miscellaneous</b>			
Coffee & Breakfast for volunteers			
Event Day Volunteer food - Pizza			
Online survey for participants			
Print Framing			
Miscellaneous			
	Subtotal		
	<b>Total Expenditures</b>		
Total Revenue			
Total Expenditures			
<b>TOTAL PROFIT/LOSS</b>			

#### 4. INSURANCE

##### Insurance Details

*Keep a copy of the Insurance Certificate with this form.*

Name of Insurer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Policy # and Expiration Date: \_\_\_\_\_

Public Liability and Asset Value: \_\_\_\_\_

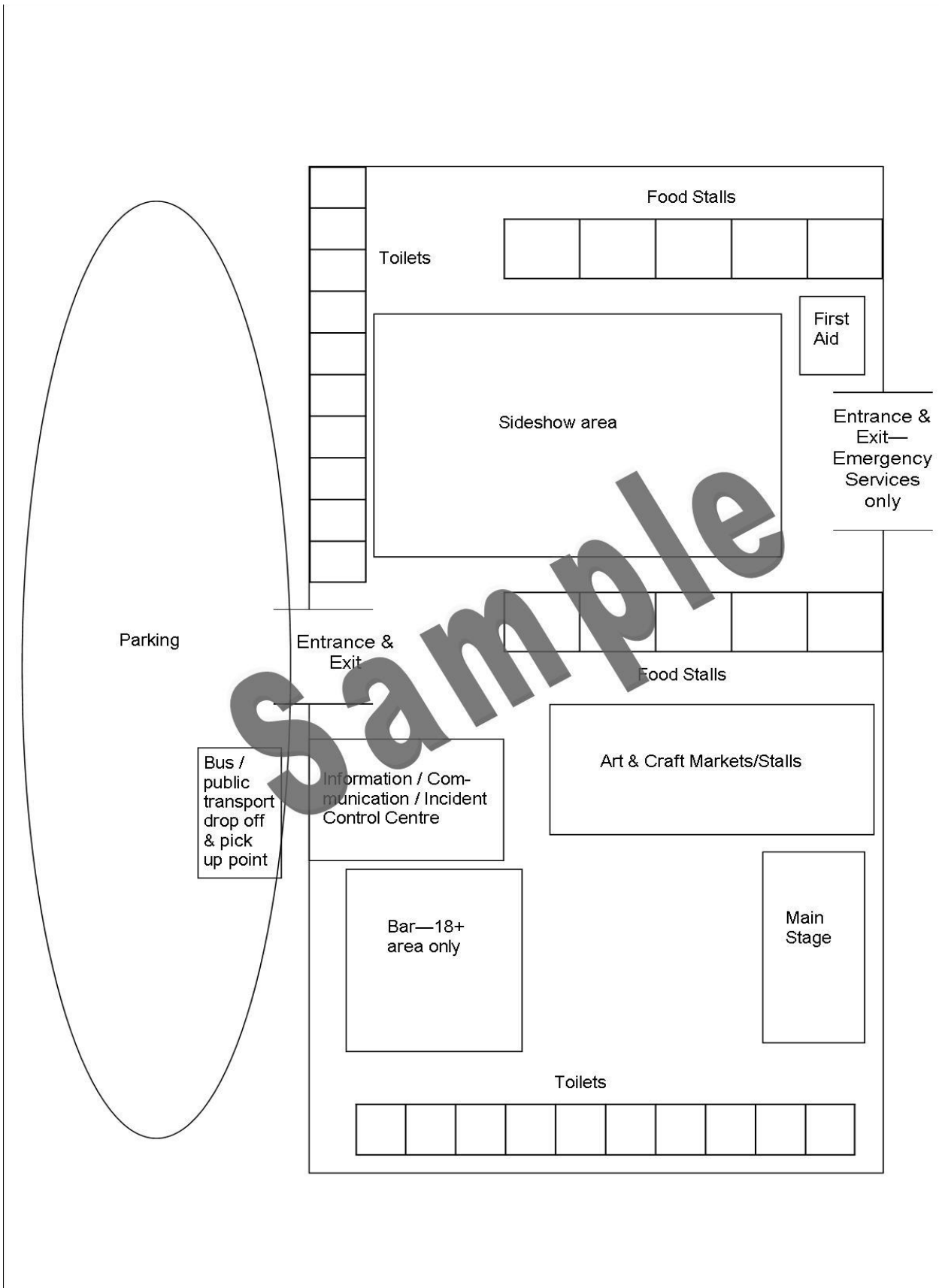
#### 5. THE VENUE

##### 5.1 Potential Hazards

List identified hazards at the site and actions necessary to minimize risk.

Hazards Identified for Each Activity	Action Required to Minimize Risk


**5.2 Site Plan**





## 6. TRAFFIC AND PEDESTRIAN MANAGEMENT

### 6.1 Traffic Management Plan

Has a detailed traffic and pedestrian entrance / exit plan parking map been developed? YES / NO

Is there parking for:

	YES	NO	N/A
Emergency Vehicles			
Key Stakeholders			
Disabled Patrons			
General Parking			
Overspill			
Buses			
Taxis			

### 6.2 Road Closures

Are any road closures necessary for the event? YES /NO

If yes, contact Marcia Qualls at the City of South Bend, 574.235.5939, to arrange a meeting with the Board of Public Works and other affected governmental agencies and see the application in the appendix of this document.

Have adjoining neighbors and business owners been contacted? YES /NO

Name of Owner or Business Manager	Contact Number	Who Made Contact / Outcome

## 7. INCIDENT MANAGEMENT PLAN

### 7.1 Event / Incident Control Center

Ensure the Incident Control Center is clearly marked on the Site Plan and detail where First Aid will be supplied.

Clearly mark Exit / Evacuation Points and locations of Fire Extinguishers.

How will communication between Event Organizers be conducted on the day of? \_\_\_\_\_

\_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_  
How will information be communicated to the public? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In the case of an emergency, who will be the main point of contact with police and other emergency services? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has a plan been submitted to the South Bend Fire Department? YES /NO

What arrangements have been made for lost children / property? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following is a sample of a simple Incident Report form.

Event Chair \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Date and Time of Incident \_\_\_\_\_

Description of Incident \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Persons Involved:

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Action Taken \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**7.2 Incident Management Plan**

Contacts

**First Aid Officers**

Names \_\_\_\_\_

Phone Numbers \_\_\_\_\_

**Police Contact**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Fire Service Contact**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Ambulance Service Contact**

Name \_\_\_\_\_ Phone \_\_\_\_\_

**8. PUBLIC HEALTH**

**8.1 Temporary Food Stalls**

	Food Vendor Name	Contact Person	Phone Number	Type of Food	City Permit
1					
2					
3					
4					
5					
6					
7					

**8.2 Alcohol**

Will alcohol be served at the event?

YES / NO

If yes, will the alcohol be sold?

YES / NO

Will alcohol be distributed by a licensed vendor or has a Temporary Liquor License been obtained by Indiana's Alcohol & Tobacco Commission?

YES / NO

**8.3 Toilets**

How many patrons are expected for the event? \_\_\_\_\_

How many toilets will be available for the event?

Permanent	Male	Female	Handicapped
Temporary	Male	Female	Handicapped

Toilet Maintenance Contact: \_\_\_\_\_

**8.4 Shelter**

Is the site plan marked to indicate any available shelter?

YES / NO

**8.5 Waste Management**

What arrangements have been made for the disposal of trash during and after the event? \_\_\_\_\_

\_\_\_\_\_

Have the locations of permanent and temporary trash receptacles been noted on the site map? \_\_\_\_\_

YES / NO

**8.6 Noise**

What activities will create higher than normal noise levels and how will they be monitored and regulated should it be necessary? \_\_\_\_\_

\_\_\_\_\_

**9. Public Safety**

**9.1 Security and Crowd Control**

What is the basis for the type of security that will be utilized for the event?

\_\_\_\_\_

Name of Security Firm \_\_\_\_\_

Contact Name / Phone Number \_\_\_\_\_

Number of Security Personnel \_\_\_\_\_

Police Contact Name / Phone Number \_\_\_\_\_

**9.2 Place of Public Assembly**

Will the event be fenced to limit public access? YES / NO

Have the proper authorizations been acquired? YES / NO

**9.3 Lighting and Power**

Will temporary lighting be used? YES / NO

Is there an emergency power source? YES / NO

Have lighting control locations been noted on the Site Plan? YES / NO

Contact person / Phone number for issues regarding electricity / power.

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**9.4 Temporary Structures**

Will temporary structures be used? YES / NO

If yes, detail temporary structures that will be used. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have proper permits been obtained for the use of temporary structures?

YES / NO

**9.5 Fireworks and Pyrotechnics**

Will there be pyrotechnics used as part of the event. YES / NO

Has the proper permit been obtained? YES / NO

Pyrotechnics Contact Name \_\_\_\_\_

Phone \_\_\_\_\_

**10. EVENT PROMOTION AND MARKETING**

**10.1 Ticketing**

Will this be a ticketed event? YES / NO

Pre-Sold? YES / NO

At the Gate? YES / NO

Ticket Price: Pre- Sold \_\_\_\_\_

**10.2 Signage**

The following Temporary Signage will be installed as indicated by the Site Plan.

✓	Entrances / Exits	✓	Parking
	Smoking / No Smoking		Information
	Alcohol Regulations		Toilets
	Lost and Found		Food / Beverage
	Public Transportation		First Aid
	Security		Advertisements

**10.3 Advertising**

Sample Scheduling and Budget Template for Marketing Activities.

<b>Marketing Plan</b>				
	Production Date	Run Dates	Estimated	Actual
<b>Print Media</b>				
Program & Schedule				
Sponsor Packets				
Press Release				
Newspaper Ads				
Magazine Ads				
Program Ads				
Mailings				
Brochures				
<b>Electronic Media</b>				
Radio Advertising				
TV Advertising				
<b>Outdoor Advertising</b>				
Billboards				
<b>Creative Services</b>				
Web Design				
Print Design				
Collateral Design				
Radio Production				
Television Production				
Photographer				
<b>Misc. Marketing</b>				
<b>Total</b>				

## USEFUL CONTACTS

As the planning process gets underway, it is necessary to begin reaching out to the entities from whom certain approvals and licenses may be needed. The City of South Bend is the best place starting place to begin to get an understanding of all that may be required for a particular type of event.

### **City of South Bend**

Marcia Qualls, Customer Service  
574-235-5939  
[mqualls@southbendin.gov](mailto:mqualls@southbendin.gov)

Jitin Kain, Director of Planning  
574-235-5835  
[jkain@southbendin.gov](mailto:jkain@southbendin.gov)

Board of Public Works  
574-235-9251

Applications and Forms  
[www.southbendin.gov/city/boards\\_\\_\\_commissions/applications\\_&\\_forms.asp](http://www.southbendin.gov/city/boards___commissions/applications_&_forms.asp)

### **Downtown South Bend, Inc. (DTSB)**

Aaron Perri, Executive Director  
574-282-1110  
[aperri@downtownsouthbend.com](mailto:aperri@downtownsouthbend.com)

Jackie Appleman, Director of Communications and Development  
574-968-7291  
[jappleman@downtownsouthbend.com](mailto:jappleman@downtownsouthbend.com)

Cathy Dietz, Events and Operations Coordinator  
574-968-7288  
[cdietz@downtownsouthbend.com](mailto:cdietz@downtownsouthbend.com)

Grant Applications  
[www.downtownsouthbend.com](http://www.downtownsouthbend.com)

### **Community Foundation of St. Joseph County, Arts Everywhere**

Angela Butiste, Program Officer  
574-232-0041  
[angela@cfsjc.org](mailto:angela@cfsjc.org)

Arts Everywhere Fund Grants  
<http://www.cfsjc.org/cfsjc-leadership-initiatives/artseverywhere-initiative/>

### **South Bend Tribune**

Jamal Henry, Account Development Specialist  
574-235-6088  
[jhenry@sbtinfo.com](mailto:jhenry@sbtinfo.com)

Advertising  
574-235-6389

In the Bend  
<http://www.southbendtribune.com/entertainment/inthebend/>

### **Indiana Arts Commission**

[www.in.gov/arts](http://www.in.gov/arts)

### **Indiana Alcohol & Tobacco Commission**

[www.in.gov/atc](http://www.in.gov/atc)

### **Indiana Department of Homeland Security**

[www.in.gov/dhs](http://www.in.gov/dhs)

### **South Bend Police Department**

[www.southbendpolice.com](http://www.southbendpolice.com)  
574-235-9201

### **South Bend Fire Department**

574-235-9255