

Wabaunsee County Event Planning Request Form

Date request received _____

Date of Event _____ Time of Event _____ AM or PM

Date of Event _____

Contact Name _____

Phone Numbers Home _____ Office _____

Cell _____

Name of Event _____

Type of Event _____

If fundraiser, what is the contribution per person _____

Sponsor(s) _____

Location _____

Roadway(s) and route to be used if event is a walk, race, or ride that will require any assistance from law enforcement.

****NOTE**** Any and all traffic assistance on state or local roads must be conducted by and/or approved by law enforcement with jurisdiction of those roads.

Purpose of Event _____

Format _____

Estimated Attendance/Participants _____

Other Speakers/VIPs _____

(Name and Title)

Media coverage expected: Yes No Maybe/Invited

TV Radio Print

Candidate required to attend from _____ to _____

Comments: _____

DATE

_____ First response

_____ Regret: by phone [] by letter []

_____ Tentative yes

_____ Canceled: by whom _____

_____ Confirmed: by whom _____

Staffed by _____

****This form is to be completed and approval must be given anytime the event or any part of the event takes place on property other than privately owned property****