

GIRL SCOUTS OF SAN FRANCISCO BAY AREA

CROSSROADS ASSOCIATION

EVENT PACKET

An “event” is any activity open to **more** than two troops that involves a budget over \$100. For an activity involving less money, submit an Event Financial Report to the Crossroads treasurer within 3 weeks after the event. No other parts of this packet are necessary.

Questions? Call the Association Event Coordinator!

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GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION

EVENT TIMELINE AND CHECKLIST
3 MONTHS PRIOR TO EVENT

- Determine Event theme and program content
- Secure site (see "Event Site Checklist", pg. 4)
- Develop event budget (see "Budget Worksheet, pg. 13 [last page])
- ✓ For a large event (budget over \$2500), choose separate people to be Event Organizer and Event Treasurer
- ✓ Does your event qualify for a Crossroads subsidy? Our Association offers a subsidy on many events subject to the Crossroads Association Budget. Contact your SUD or the Association Event Coordinator.
- Create Event Flyer (see "Flyer Checklist" and "Sample Flyer", pg.s 5-6)
- Contact Association Event Coordinator:
- ✓ Check School and Girl Scout calendar to avoid scheduling conflicts and religious holidays.
- ✓ **Fax or drop off a copy of Flyer and Event Budget to Association Event Coordinator before ACT meeting. Please allow time for her to review it before the meeting.**
- ✓ Consult Safety-Wise, determine applicable safety requirements:
- ✓ Adult/Child Ratio: _____
- ✓ Non-member Insurance? _____ (call Carol Paulsen at Council to arrange)
- ✓ Name of Level 1 First Aider _____
- ✓ Name of Level 2 First Aider (if required) _____
- ✓ Other required training? I.e. Troop trips, Beginning Camping, or for large events does your committee include a person with Camporee and Event Directors training? _____
- Decide on Event patch style. (Design-it, JoyCrest, etc)
- Contact possible donors via telephone for supplies (snacks, gifts etc.)
 - ✓ After securing approval of Assoc. Event Coordinator, follow-up phone calls with written requests on Girl Scout letterhead. Contact MDD
- If Event is a fundraiser, submit a "Request for Fundraising" for required SUD approval.

ACT MEETING, 2 MONTHS PRIOR TO EVENT

- Present Event Flyer and Budget Worksheet to ACT (bring 10 copies of each)
 - ✓ Presenter should be Event Organizer or another member of the event committee able to answer questions regarding any aspect of the event. Approximate length of presentation is 5 minutes.
 - ✓ If girl-sponsored event, girl(s) should make presentation
- Any needed advance funds or Association subsidy must be requested at this time, and approved by vote of the ACT.
- Flyer, with any ACT modifications, may be presented and distributed at the next Leader meeting.
- ✓ Event committee is responsible for making copies and delivering flyers
- ✓ Be sure to submit a copy of the finished flyer to Association Event Coordinator and Service Unit Directors.
- ✓ Contact SUD to get on the agenda for the upcoming Leader Meeting
- ✓ For girl-sponsored events, girls are encouraged to present the event
- ✓ You are also encouraged to e-mail a brief article to include in the next Crossroads Connection Newsletter.

GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION

EVENT TIMELINE AND CHECKLIST (con't)

1 MONTH PRIOR TO EVENT

- ❑ Begin to process registrations:
- ✓ Set up registration log (track totals, use for check-in at event; see sample pg.7)
- ✓ If assistance from Crossroads Friendship Fund is requested, waive fee for girl, record the amount as credit under income on the Event Financial Report (pg. 10)
- ✓ Send out confirmations and/or additional information, if appropriate
- ✓ Periodically submit checks received with Crossroads Deposit slip (pg. 12) to Association Treasurer. You should record the name of Event, and Event date, and the Troop number on every check submitted to the Association Treasurer.
- ❑ Order patches (custom patches may take longer)
- ❑ Purchase and/or get confirmation on all supplies and donations. Be sure to stay within budget when making purchases – get permission from Association Event Coordinator before purchasing over budget.
- ❑ Prepare event evaluation form (see example, pg. 8), copy or create your own
- ❑ Prepare troop registration packets (to distribute at check-in), if appropriate
- ❑ Do “dress rehearsal” of ALL planned activities!

Within 3 WEEKS AFTER THE EVENT

- ❑ Complete Event Financial Report (pg. 10) and submit to Crossroads Treasurer. All **original receipts** should be attached to a separate sheet of paper and attached to reimbursement form
- ✓ Keep copy of all receipts, budget, and financial report for your records
- ✓ Submit requests for reimbursement of out-of-pocket costs (see pg. 11) to Treasurer
- ✓ Submit any remaining checks (see pg. 12) to Treasurer
- ✓ Event treasury should be closed out within 3 weeks of event.
- ❑ Evaluate the event
- ✓ Within first few days, write brief personal evaluation of event
- ✓ Complete event evaluation summary (see page 9), using participants' evaluations
- ❑ Submit final event report to Association Event Coordinator. Include:
 - ✓ Copy of event financial report
 - ✓ Event evaluation summary
 - ✓ Your personal evaluation of event
 - ✓ Any other information that might help subsequent organizers for this event (optional)
- ❑ Return any equipment purchased with event funds to the Livermore Cabin (or to alternate location within Crossroads, as directed by the Crossroads Association Coordinator or Association Event Coordinator).
- ❑ Write thank-you notes to the donors who sponsored the event
- ❑ Write thank-you notes to the people who helped with the event

CONGRATULATIONS - YOUR EVENT IS COMPLETE!

**GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION**

EVENT SITE CHECKLIST

General Site

- Is the Event site easily accessible to all members, including those with disabilities?
- Is there enough parking for the expected attendees?
- Is the proposed site safe (free from obvious hazards), secure and clean?
- Is the site well-lit (especially if the event extends past dusk)?
- Will the site be suitable in all weather conditions, or is there a rain check policy?
- Does site require a 'facility use form'- if so, file and obtain approval for use?

Building/Activity Area

- Is the site large enough to accommodate the expected attendees (fire marshal limits)?
- Is the area large enough for the planned activities?
- Is the site properly ventilated and heated?
- Are there at least two exits (from the building)?
- Are the emergency exits functioning, easily accessible, adequate, and well marked?

Site Facilities

- Does the food preparation area meet state and local standards?
- Is there enough potable water for the expected participants?
- Are there enough toilets and sanitary facilities for the expected attendees?

Your planning

- Is there First Aid equipment on hand? If not, you must provide it.
- Have you planned for proper disposal of all waste materials and site clean-up?
- The safety rules specific to the Event activities must be **posted**, understood and practiced by all.
- See Safety-Wise for precise guidelines for your particular activity.

GIRL SCOUTS OF SAN FRANCISCO BAY AREA
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FLYER CHECKLIST

UPPER (INFORMATIONAL) PART OF FLYER should include the following:

- ❑ GIRL SCOUTS OF SAN FRANCISCO BAY AREA must be at the top of the flyer.
- ❑ **WHAT:** event name, brief description
- ❑ **WHO can attend:** level (B, J C/S), service unit, school, etc. (if applicable)
- ❑ **WHEN:** date, time
- ❑ **WHERE:** location name and address
- ❑ **HOW MUCH:** cost per girl; cost per adult; what is included with cost
- ❑ **REGISTRATION DEADLINE,** any limits on attendance (i.e., “limited to 300 girls & adults”)
- ❑ **PROCEEDS**
 - ✓ If event is a fund-raiser, this must be specifically stated, along with description of what funds will be used for
 - ✓ For all other events, if excess funds will go anywhere other than the Association general treasury, it must be explicitly stated on the flyer. Example: “Any net proceeds will be donated to the *Crossroads Trekkers Fund.*”
- ❑ **EVENT SPONSOR:** Association, service unit, school, troop, etc.
Indicate if the Event is a Bronze, Silver or Gold Project
- ❑ **CONTACT NAME & PHONE NUMBER:** Person to call with questions – usually event organizer

LOWER (REGISTRATION) PART OF FLYER should include the following:

- ❑ **Registration form:** Include spaces for
 - ✓ Troop info: number; leader name, phone, address (if needed, i.e., to send out confirmation or other event info)
 - ✓ Number of girls attending (x cost per individual girl) = total due for girl registration
 - ✓ Number of adults attending (x cost per individual adult) = total due for adult registration
 - ✓ If no fees for adults, space for number of adults attending (needed for Safety-Wise ratios and to insure you don’t exceed building/location capacity)
 - ✓ Total amount due
- ❑ **Payment**
 - ✓ Checks payable to “Crossroads Association”
 - ✓ Include the phrase, “One check per troop”
- ❑ **Submitting**
 - ✓ Registrar’s name and address (& phone, if registrar is different from contact name given above)
 - ✓ Registration deadline (specify if deadline is “postmarked by” or “received by”; specify “register early as space is limited” if applicable)

* * * **SAMPLE FLYER** * * * *

GIRL SCOUTS OF SAN FRANCISCO BAY AREA

Summer Vacation '99

Lydiksen Girl Scout Event

All Lydiksen Girl Scouts
and their Father/Uncle/Special Friend are invited!

Date: Friday, March 19, 1999
Time: 7:00 PM - 9:30 PM
Place: Lydiksen Multipurpose Room
Cost: 4.00 per person**

**Each Troop will be responsible for bringing three trays of food
(Fruit or vegetable, dessert, and hearty fingerfoods).

Make checks payable to Crossroads Association & return by Feb. 15

To: Karen Rodriguez, 5555 Greenwood Drive, Pleasanton 94566

Questions ??? Call Karen at 555-0123 or Moira at 555-4567

Summer Vacation '99 Registration

Leader Name _____ Phone _____
Troop # _____ Level (circle one): D B J

_____ # of girls attending x \$4.00 = \$ _____
_____ # of Adults attending x \$4.00 = \$ _____

Total enclosed \$ _____

*Please make check payable to **Crossroads Association**. (One check per troop,)*

Return by February 15 to: Karen Rodriguez
5555 Greenwood Drive
Pleasanton, Ca 94566

GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION

Event Evaluation Form

Use this form as a guide to develop an evaluation for your event. Give the form to troops at the end of the event, or in their registration packets. Ask to have evaluation returned at close of event (schedule time in your program for completing evaluations, if appropriate), or at the next Service Unit meeting. (If, due to the nature of your event, you'd like each participant to fill out her own evaluation, you may want 2 different forms: one for leaders including the logistics questions, another shorter and simpler version for the girls.)

Event Name: _____ **Date** _____

Troop Level (if multilevel event): _____

Please circle responses:

1. Did you and your girls enjoy this event? Yes / No
2. Were the facilities appropriate for the program and number of participants? Yes / No
3. Do you feel this was a timely month for the event? Yes / No
4. Was the event appropriate to the age level(s) it served? Yes / No
If no, please explain. _____
5. Did you receive enough information about the event? Yes / No
6. Did you have enough time to register? Yes / No
7. Did you feel this event was priced fairly? Yes / No
8. Was there adequate time allotted for the event activities? Yes / No
9. What did you and your girls like BEST about the event?

10. What did you and your girls like LEAST about the event?

11. Comments? Suggestions?

12. Ideas for the future?

GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION

Event Evaluation Summary

Event Name _____ **Date** _____

Event Organizer Name _____ Phone _____

Address _____ City _____ Zip _____

Other adults involved in event planning:

Name Phone Position

Other key contacts/resources for event:

Name Phone Contribution

Total number of troops participating _____

Total number of girls participating _____

Total number of evaluations received _____

Attach copy of the evaluation form that participants/leaders (circle one) filled out.

- For each yes/no question: On the attached copy of your evaluation form, indicate the total number of yes responses and total number of no responses, for all evaluations received.
- For open-ended questions, summarize representative comments that were:

Positive:

Negative:

General Comments and Suggestions:

Ideas for future:

GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION
EVENT FINANCIAL REPORT
Due within 3 weeks of event

Event Name: _____ Event Date: _____
 Report Date _____
 Prepared by: _____ Position: _____ Phone: _____

Flyer designated excess funds to: _____

This event is a fundraiser. Please make check payable to: _____

INCOME:

<u>DESCRIPTION</u>	<u>AMOUNT</u>
Girl Fees: # girls _____ X fee per girl _____ =	\$ _____
Adult Fees: # adults _____ X fee per adult _____ =	\$ _____
Donation	\$ _____
Subtotal (should equal total of deposits)	\$ _____
Crossroads Subsidy (not for fundraisers)	\$ _____
Crossroads Friendship Fund	\$ _____
Total Income (should equal total of deposits)	\$ _____

EXPENSES:

<u>DESCRIPTION</u>	<u>AMOUNT</u>
Site Rental Fee	_____
Printing	_____
Food	_____
Patches	_____
Cleaning Supplies	_____
Insurance (non-GS attendees)	_____
Postage	_____
Decorations	_____
Craft Supplies	_____
Other Program Supplies (list)	_____
_____	_____
_____	_____
Miscellaneous (list)	_____
_____	_____
_____	_____
Total Expenses	-\$ _____
<u>Net Profit (Loss) from Event</u>	\$ _____

CROSSROADS PAYMENT REQUEST

Request Date: _____

Issue Check to:

Name _____ Phone _____

Address _____
Street City Zip

Event/Program Name: _____ Event date: _____

Original receipts must be attached for all items.

Items for payment (list individually):

Supplier/Store	Description of Items	Amount
TOTAL AMOUNT		

Authorized Signature*:

For Bookkeeping Use:

Date paid: _____

Check #: _____

* Event Organizer or (large events) Event Treasurer

CROSSROADS PAYMENT REQUEST

Request Date: _____

Issue Check to:

Name _____ Phone _____

Address _____
Street City Zip

Event/Program Name: _____ Event date: _____

Original receipts must be attached for all items.

Items for payment (list individually):

Supplier/Store	Description of Items	Amount
TOTAL AMOUNT		

Authorized Signature*:

For Bookkeeping Use:

Date paid: _____

Check #: _____

* Event Organizer or (large events) Event Treasurer

CROSSROADS DEPOSIT SLIP

Submit to Crossroads Treasurer

TODAY'S DATE: _____

EVENT & DATE: _____

Cash:
Checks:
TOTAL DEPOSIT:

Event Organizer: _____

Signature: _____
(submitted by)

For Bookkeeping Use only:
Deposit Amount Verified By: _____
Date Deposited: _____

CROSSROADS DEPOSIT SLIP

Submit to Crossroads Treasurer

TODAY'S DATE: _____

EVENT & DATE: _____

Cash:
Checks:
TOTAL DEPOSIT:

Event Organizer: _____

Signature: _____
(submitted by)

For Bookkeeping Use only:
Deposit Amount Verified By: _____
Date Deposited: _____

CROSSROADS DEPOSIT SLIP

Submit to Crossroads Treasurer

TODAY'S DATE: _____

EVENT & DATE: _____

Cash:
Checks:
TOTAL DEPOSIT:

Event Organizer: _____

Signature: _____
(submitted by)

For Bookkeeping Use only:
Deposit Amount Verified By: _____
Date Deposited: _____

CROSSROADS DEPOSIT SLIP

Submit to Crossroads Treasurer

TODAY'S DATE: _____

EVENT & DATE: _____

Cash:
Checks:
TOTAL DEPOSIT:

Event Organizer: _____

Signature: _____
(submitted by)

For Bookkeeping Use only:
Deposit Amount Verified By: _____
Date Deposited: _____

**GIRL SCOUTS OF SAN FRANCISCO BAY AREA
CROSSROADS ASSOCIATION
BUDGET WORKSHEET**

Event Name: _____ Event Date: _____
 Budget Submission Date: _____
 Prepared by: _____ Position: _____ Phone: _____

ANTICIPATED EXPENSES:

<u>Description</u>	<u>Estimated Cost</u>
• Site Rental Fee	_____
• Printing	_____
• Food	_____
• Patches	_____
• Cleaning Supplies	_____
• Insurance (non-GS attendees*)	_____
• Postage	_____
• Decorations	_____
• Craft Supplies	_____
• Miscellaneous (list)	_____
_____	_____
_____	_____
_____	_____

Total Estimated Expenses (A) _____

ANTICIPATED INCOME:

<u>Description</u>	<u>Estimated Income</u>
• Crossroads Subsidy (for qualifying events)	_____
Other _____	_____

Income credits (total above items (B)) _____

Calculate income needed from participants fee **A – B = (C)** _____

- Determine whether to charge equally for girls and adults. Estimate attendance ratio girls:adults.
- Girl Fees: # girls ** _____ X fee per girl _____ = _____
- Adult Fees: # adults ** _____ X fee per adult _____ = _____
-
- **Total of fees from participants (should ≥ C) (D)** _____
- **Total Estimated Income (B + D) = (E)** _____

Net Estimated Profit or Loss from Event (E – A =) _____

**Insurance for non-GS attendees (parents, siblings) required; available from Council for very nominal fee. Recommended for all events.
 **Estimate attendance of 60-80% of event capacity, depending on nature of fixed costs*