

VENDOR EVENT PLANNER



Event Name: _____ Date: _____ Time: _____
 Location: _____ Fee: _____ Donation: _____
 Contact Name: _____ Phone: _____
 Email: _____ Anticipated Attendance: _____

EVENT PREP CHECKLIST:

- | | |
|--|--|
| <input type="checkbox"/> Booth fee mailed/paid | <input type="checkbox"/> Pens, markers, chalk |
| <input type="checkbox"/> Products ordered/on hand | <input type="checkbox"/> Planner/Open party dates |
| <input type="checkbox"/> Sales fliers | <input type="checkbox"/> Order forms |
| <input type="checkbox"/> Catalog/Highlight mailers | <input type="checkbox"/> Drawing slips and basket |
| <input type="checkbox"/> Clipboards | <input type="checkbox"/> Business cards |
| <input type="checkbox"/> Calculator | <input type="checkbox"/> Name tag/Apron |
| <input type="checkbox"/> Cash/change/bag | <input type="checkbox"/> Bags for purchases |
| <input type="checkbox"/> Opportunity flier/Host Perks flier | <input type="checkbox"/> Signs/banners/easels |
| <input type="checkbox"/> Host packets | <input type="checkbox"/> Phone charger |
| <input type="checkbox"/> Tablecloth(s) | <input type="checkbox"/> Product demo/display items |
| <input type="checkbox"/> Tables, chairs, tents (if not provided) | <input type="checkbox"/> Tape, stapler, hand sanitizer, paper towels |
| <input type="checkbox"/> Door prize | |

EVENT FOLLOW UP CHECKLIST

- Enter new leads into customer database
- Follow up phone calls/texts to all leads
- Contact prize winner(s)
- Thank you email/text to all leads
- Thank you note to event coordinator
- Get application/date for next event

EVENT SUMMARY

ACTION	AMOUNT	NOTES
Catalog Orders Placed		
Cash & Carry Sold		
Parties Booked		
Sponsoring Leads		
VIP Group Leads		
Total Number of Leads		