

COMMEMORATION OVERVIEW

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NAME OF EVENT

COMMEMORATION OVERVIEW

VERSION # _____

____/____/____ DATE

DESCRIPTION OF EVENTS TO COMMEMORATE	
POSSIBLE WAYS TO NOTE THE OCCASION	
POTENTIAL WAYS TO MARK THE COMMEMORATION BEFORE AND AFTER THE PRINCIPAL ANNIVERSARY EVENT	
POSSIBLE HIGHLIGHTS OR FOCAL POINTS OF COMMEMORATION	
ORGANIZATIONS/GROUPS/ INDIVIDUALS THAT COULD BE INVOLVED IN THE PLANNING	

ANNUAL CALENDAR

<div style="border: 1px solid black; width: 100%; height: 100%;"></div>

YEAR

ANNUAL CALENDAR

VERSION # _____

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC				
WEEK 1	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___
WEEK 2	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___
WEEK 3	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___
WEEK 4	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___
WEEK 5	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___	___ TO ___

LAYOUT
MAP

VERSION # _____

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ROOM/LOCATION NAME

LAYOUT
MAP

___/___/___ DATE

**TRAFFIC
FLOWS**

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VENUE/ACTIVITY OF COMMEMORATION

**TRAFFIC
FLOWS**

VERSION # ____

____/____/____ DATE

<p>HOW MANY PEOPLE/CARS NEED TO BE ACCOMMODATED AT THIS EVENT FOR WHAT PERIOD OF TIME?</p>	
<p>OPTIONS/DECISIONS FOR HANDLING THE FLOW (OVERFLOW?) OF PEOPLE/CARS ANTICIPATED</p>	
<p>SIGNAGE WORDING AND POSITIONING AT THE VENUE</p>	
<p>COMMUNICATION SYSTEMS TO BE ANALYZED/ACQUIRED/ ESTABLISHED</p>	
<p>EXIT STRATEGY IN CASE OF EMERGENCY (FIRE, NATURAL DISASTER, POLICE ACTIVITY IN AREA)</p>	

INCOME CENTERS

NAME OF COMMEMORATION

INCOME CENTERS

VERSION # _____

____/____/____ DATE

ITEM	POSSIBLE SPONSOR	DETAILS	NUMBER	PRICE	COST	NET	CONTACT
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
				\$	\$	\$	
TOTAL						\$	

EVENT
BUDGET

IDENTIFY MAJOR ELEMENT OR WHOLE COMMEMORATION

EVENT
BUDGET

VERSION # _____

____/____/____ DATE

THIS ACTIVITY	WITH THESE ATTRIBUTES	AT THIS UNIT COST		FOR THIS NUMBER OF UNITS		THIS TOTAL AMOUNT
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
			X		=	\$
				TOTAL	=	\$

PURCHASES

[Empty rectangular box for budgetary category]

PURCHASES

BUDGETARY CATEGORY

VERSION # _____

AMOUNT IN CATEGORY BUDGETED

\$ [Empty rectangular box for budgeted amount]

____/____/____ DATE

TYPE OF ITEM	WITH THESE CHARACTERISTICS	AT THIS POTENTIAL QUANTITY/COST		BEST SEARCH LOCATIONS	BEST CONTACT POINTS @ LOCATION
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		#	\$		
		TOTAL			

CONTINGENCY CONSIDERATIONS

COMMEMORATIVE EVENT TITLE

CONTINGENCY CONSIDERATIONS

VERSION # ____

____/____/____ DATE

TYPE OF CONCERN	IF THIS OCCURS (DESCRIBE BRIEFLY)	POSSIBLE CHANGES IN SITES/TIMING/ARRANGEMENTS	POTENTIAL IMPACT ON AUDIENCE
PROBLEM AFFECTING PROGRAM			
ECONOMIC/FINANCIAL COMPLICATIONS			
WEATHER FACTORS			
POTENTIAL NATURAL DISASTER			
ACCIDENT OR OTHER EMERGENCY OCCURANCE			
POLICE/LABOR/SECURITY ACTIONS			

