

MHMS PTO Event Proposal

Please fill out this proposal form with as much information as possible. Proposal ideas should be submitted to the Board **30 days** prior to the event to be considered for approval. Attach estimates if any. Allow for **2 weeks** for Board response. Board review does not guarantee acceptance of proposal.

Date Submitted: ____/____/____

Point of Contact: _____ Email: _____

Date of Event: ____/____/____ Name of Event: _____

Start Time: _____ End Time: _____
(Times should include set-up and clean-up)

Details of Event (for New Events additional information can be attached): _____

☐ Whole School ☐ Grade(s): _____ ☐ Particular Teacher(s): _____

Location: ☐ Classroom _____ ☐ Auditorium ☐ Yard (Playground) ☐ P1 ☐ P2 (P1: Pre-K-2; P2: Grd 3-8)

Folding Tables: ☐ Yes (how many) _____ ☐ No Chairs: ☐ Yes (how many) _____ ☐ No

Volunteers needed: _____ (Note: Event Chair is responsible for recruiting & organizing all volunteers)

Budget: \$ _____ (Note: Include all supplies. PTO is not responsible for any amount over budget)

Detailed Breakdown of Expenses:

Item	Quantity	Unit price	Extended cost
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		Subtotal	\$ -
		Est Tax	\$ -
		Total	\$ -

NOTES:

- All receipts must be submitted within 2 weeks of the event to the PTO Board Treasurer
- A Post-Event Review should be submitted to the Board including approximate number of attendees, number of volunteers, actual costs, money raised, lessons learned for next time and any other pertinent information for future events.

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Administrative Use Only:

Date Received: ____/____/____

Board Review: ____/____/____

☐ Approved ☐ Not Approved

Signature: _____ Board Position: _____

If not approved, reason: _____
