**Start of Function Checklist**

Function\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Coordinator meets with Team Facilitator(s) Review Toolkit/Guidelines/Roster.
* Coordinator meets with Team Facilitator(s) to discuss possible Program Themes.
* **3 months Ahead**: Coordinator schedules 1st “All Team Meeting” + A/V Finalize Theme.
* Lead Facilitator schedules 2nd “All Team Meeting” : Program, Décor, Food/Kitchen. \*Notes to Coordinator, if not attending.
* **2 Months****Ahead**: Send Newsletter & Office Flier Information by the 15th day of the month prior to the Event.
* Send draft Agenda to Coordinator for Advisory Team Review
* **1 Month Ahead**: set **dates** for: -Kitchen Helpers’ Training, -possible A/V,
* program rehearsal, -food shopping --Food Prep Day Before? Or A.M. of Event ? - Reserve FCC Rm/Kitchen

 Confirm -Dishwasher, -1st Time Attendee’s Table, -Deacon of the Month for

 garbage removal. **2 Weeks Ahead:** Ask *only* one member to request and then send out

 confirmed ***list*** of

1. **Table Hostesses + 2-3 additional Table Hostesses** to move around tables, to refill pitchers, or get food.
* **2-4 Door Greeters**
* Identify who will make reminder calls to attendees
* **1 Week Ahead:**
* **Registrar will send Total expected Guest Count** to **Quarterly Coordinator and Lead Facilitator.**
* **Contact: Table Room Set-Up.**
* **Confirm Refrigerator Use.**
* **Week of Event**: On Monday morning get Total Attendee List with Contact Information from Registrar and have team members make **reminder calls** to all guests. Check with Registrar for updates on cancellations and wait list prior to event.
* Shoppers for Food: Save all receipts with original plus 2 copies.

++Be sure all participants on stage have a copy of the final agenda and routine for introductory format: .birthdays, offering, new attendees, introductions that the emcee is to follow.

* **Day of Event**: Food Prep, Meet with Table Hostesses 1 hour before doors open and review hostess responsibilities, and ask one team member to do Quality Control check of table settings.
* Turn in original **Receipts** with form and 2 copies of all to Treasurer, member keeps 1 copy. Total of all receipts for reimbursement cannot exceed the budget as defined by the Advisory Team.

Completed and Signed Form to Women’s Ministry Lead(s).

Team Facilitator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Quarterly Coordinator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**11-11-2023 2**