

## **Dominion Academy Event Approval Form & Checklist**

Event Name:	Event Date:			
Location: Start & End Times:				
Is this a recurring event? Yes N	o			
If yes, please give days/dates/times (	if different from initial event):			
	arge:			
	be approved and initialed by Sponsoring Adult & Headmaster.			
Approximate cost of				
event:				
Person in charge of:				
Distributing and collecting student p	ermission slips:			
Distributing, collecting, and giving c	completed guest slips to office:			
Transportation responsibility (check	all that apply): parentstudentschool carpool			
If carpool: Who is arranging	carpools?			
Sending thank you notes:				
Arranging for chaperones:				
	dPersonal Funds & Reimbursement			
Chaperones:				
Have chanerones been arranged for?	Ves No How many?			

Name of Chaperone			Contact Number (Home or Cell)		
Name of Chaperone(s)			Contact Number (Home or Cell)		
Name of Chaperone(s)			Contact Number (Home or Cell)		
Signature of Student in Charge				Date	
Signature of Sponsoring Staff Member/Adult			Date		
Signature of H	leadmaster			Date	
<ul> <li>Event of</li> <li>Guest s</li> <li>Funds</li> <li>Flier a</li> <li>Dates of</li> <li>(1)</li> </ul>	d into school ca description to be slips received an availability veri pproval: Staff/A of contact with o	nd approved by Headn fied by Business Man dult Sponsor event location sponsor(3)	r given to Office Manager naster ager Headmaster		
	hank yous sent Event		r		
0	Event	Location Sponsor Chaperones			
0	Volunteers				