

ALLEGHENY COUNTY BAR ASSOCIATION

EVENT PLANNING FORM

Please complete this ACBA event planning form and submit it to Tracy Torisky at ttorisky@acba.org at least forty-five (45) days prior to the date of your program.

Event Contact: _____

Address: _____

Phone: _____ Email: _____

Presenting Committee/Division/Section: _____

Date of Event: _____ Start Time: _____ End Time: _____

Event Location*: _____ Budget: _____

**Please make every effort to ensure that your venue is accessible to all members of the ACBA.*

Event Name/Title: _____

Estimated # of Attendees: _____ Last Day to Register: _____

Purpose/Type of Event: _____

EVENT DESCRIPTION

This information will be used for development of marketing materials for your program. Note the ACBA may edit the content for stylistic or marketing purposes.

Who is the event open to? (Check all that apply.)

- Committee/Division/Section Only All ACBA Members Guests

What is the cost to attend?

_____ Committee/Division Section Cost _____ ACBA Member Cost
_____ Guest Cost _____ Law Student Cost

Food & Beverage (check all that apply):

- Breakfast Lunch Dinner Hors D'oeuvres Plated/Served Buffet
 Breaks/Snacks Water/Soda Coffee/Tea
 Alcohol If yes: Cash Bar Open Bar Drink Tickets – how many? _____

Room Setup:

- Podium Registration Table Stage/Riser Panel Table Lecture (chairs only)
 Classroom (tables & chairs) Dinner/Lunch (rounds of 8-10) Reception (cocktail tables)
 Other: _____

Notes:

A/V Requirements:

- Microphone Projector/Screen Laptop Laptop w/sound

Additional Requirements:

- Nametags ACBA Staff Person (Registration, etc.) Signage

Other: _____

Do you plan to solicit sponsors for the event? Yes No

If yes, who are you interested in soliciting?

(Note that potential sponsors must be approved by the ACBA before the sponsorship request can be made.)

Notes:

A large, empty rectangular box with a thin black border, intended for taking notes. It occupies the upper half of the page.

Revised 6/7/23.