SCA Ltd Adora

Event Proposal

Steward: _____

Event Title: _____

Date/Time: _____

Location: _____

Event Summary:

_____

_____

_____

_____

_____

_____

_____

Proposed Budget (fill in white cells):

People Booked			Site Cost			Food Cost	
M	**NM**		Flat rate			**Total**	**/ person**
			Per person			$0.00	
			Total /person	**#DIV/0!**			

NM Levy			Kingdom Levy			Min Per Person Cost	
$5 pp			**$1 pp**			**#DIV/0!**	
$0			$0				

Actual Per Person Cost		Profit	
		#DIV/0!	

Estimated Pricing:

	Before Cutoff	After Cutoff	Add $5 per person for non members
Member			
Child 5-17			
Family			
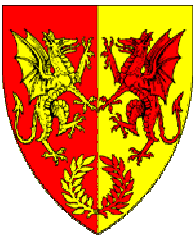
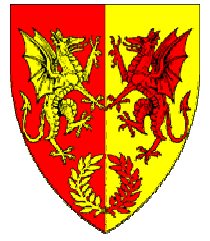# SCA Ltd Adora

Event Proposal (page 2)

Stewarding Team:

Steward

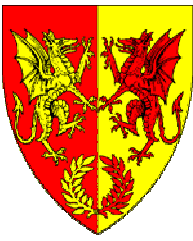Mundane Name: SCA Name:

Ph: Email:
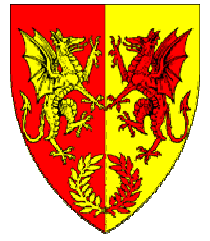
Responsibilities

Head Cook

Mundane Name: SCA Name:

Ph: Email:

Responsibilities

Position

Mundane Name: SCA Name:

Ph: Email:

Responsibilities

Position

Mundane Name: SCA Name:

Ph: Email:

Responsibilities

Position

Mundane Name: SCA Name:

Ph: Email:

Responsibilities

Position

Mundane Name: SCA Name:

Ph: Email:
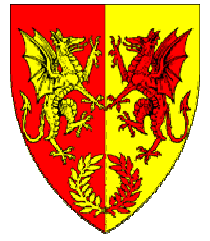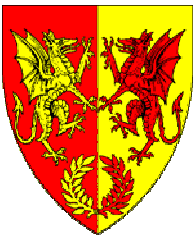
Responsibilities

SCA Ltd Adora

Event Proposal (page 3)

Venue Details:

Venue:	Address:
Contact:　　　　　　　Ph:	Email:
Cost:	
Facilities:	

Draft Timetable:

SCA Ltd Adora

Event Proposal (page 4)

Proposal Submission:

Submitted by:	Received by:
Signature:	Signature:
Date:	Date:

Shire Review:

Meeting Date: /   /

Issues Raised/Changes Proposed:

Accepted **Pending Changes** **Denied**

Shire Review 2 (if necessary):

Meeting Date: /   /

Issues Raised/Changes Proposed:

Accepted **Denied**

Steward Sign:	Seneschal Sign:
Date:	Date: