



PTG Event Planning Form

Name of Event:

Date of Event:

Estimated Budget:

Approved Budget:

Location of Event:

Time of Event:

Committee Chairperson(s) responsible:

Please provide a description of the event and/or planned activities:

Staff/Faculty Involved in the Event:

Submitted by: _____ Date: _____

Approving Signature: _____

Return completed Reimbursement Form to PTG Treasurer Lisa Ubinger or drop off in PTG mailbox in the Teacher's Lounge