



Oregon
Family Support
Network

Training & Event Form

This form should be completed in its entirety for each training. Details provided on this form will be used for marketing and event registration set up.

Event|Training Title: _____

Event Summary: _____

Event Description:

(As it should appear online)

In-person

Virtual

Enrollment capacity?

Event Date: _____

Event Time: _____

Set up as single occurrence*

Set up as recurring event

Trainer(s): _____

Location or Link:

A meeting link is required for all virtual events

Is a venue rental needed:

Yes

No

If yes, do you have a preferred location?:

Is this a public event?

Yes

No

Is there a fee for this event?

Yes

No

If yes, amount: \$ _____

*If an event spans multiple days and participants are expected to attend every day, it should be listed as a single event.



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Are scholarships available? Yes No If yes, amount: \$ _____

Promo codes:

Please enter in format:

Promo Type, CODE, Limit

separate types using a semi-colon (;)

Code limit is 256 characters

See Trello for approved codes

Is there a specific list(s) you would like invited? Yes No If yes, choose list(s)

Is there a limit to the number of tickets for a single purchaser? Yes No If yes, how many

Is this event co-presented|-sponsored by a partner? Yes No If yes, who

Has .png file of logo been provided? Yes No

Would you like to send text reminders? Yes No

If yes, do you have a specific 120 character message?

text reminders will be sent one (1) day prior to the event unless

Would you like to send email reminders? Yes No

If yes, when? 2 weeks prior 1 week prior (registrants) 1 day prior (registrants) 1 day prior (virtual only)

Do you need materials? Yes No If yes, what materials? Make sure ALL materials are set up and current in Google Drive Folder

Do you need certificates? Yes No For certificates of completion, please provide number of contact hours awarded and any special language needed.

Participation Completion



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Will you be providing child supervision?

Yes No

If yes, please provide name
and phone number for RSVP

Technology Needs:

SMART TV with HDMI

Whiteboard

Other

If Other, please describe:

Food Needs:

Beverages**

Snacks

Meal

**standard beverages are
coffee, water tea. Please
provide additional information if
other beverages are requested,
and if there is a specific snack
or meal request

Translation Needs:

Marketing Materials

Certified
Interpreter(s)

Bilingual Staff

Other

Does this event require a new flyer :

Yes

No

This is not asking for a flyer to be edited, rather is this a new
event that requires a flyer be developed.

If Other, please describe:

Additional Notes: