When possible this form should be received by the Risk Management Continuity Planning Committee (RMCPC) within 60 days prior to your event. Failure to adhere to this request may lead to a Board decision of event cancellation, especially if food or alcohol is to be present.

In April 2015 the Board of Directors of the Rotary Club of Simi Sunrise directed the RMCPC to review all club activities to determine potential risk. The RMCPC is an advisory committee; all final decisions regarding your event will come from our club board. Please direct any questions regarding this form to the RMCPC chairperson or the current club president.

Chair Person:	Co-Chair:	Today's Date:
Event Name:		
Describe activities at the	event:	
Event Date / Time:		Anticipated # of Attendees
Location:		Indoors Outdoors Both
If any portion of the Even	t is outdoors, is the property Fe	nced? Yes No
Will the location be Rente	ed or Donated by someone outs	ide of the Club? Yes No Both
Will Vehicles of any kind	(including motorized carts) be us	sed? Yes No (Insurance required)
Ages of people involved:	circle all that apply 1-10 1	.1-17 18-20 21-Above
Purpose of the Event: Cir	cle all that apply Fellowship	Fundraiser Community Event
•	ed? Yes No By Whom? ent may need to be involved – p	
	ent in any capacity? Yes No o be involved – please verify)	o If Yes, By Whom?
Will Outside Vendors be	used in any capacity? Yes No	(Attach a list with services provided)
If Yes, Name All:		
	from Outside of the Club Helping nand what specific activities wi	
If Yes, Name All:		

Note: Minutes from all committee meetings must be forwarded (emailed) to both the RMCPC Chairman and Vice Chair within two days of every meeting.