|  |  |  |  |
| --- | --- | --- | --- |
|  | YesVenue Selection | No | Notes: |
| Objective and theme of Event  |  |  |  |
| Does the venue fit the theme? |  |  |  |
| Will it make it possible for you to accomplish your objective? |  |  |  |
| Target Audience |  |  |  |
| Will the target audience be comfortable in the venue? |  |  |  |
| Is it easily accessible for your audience? |  |  |  |
| Evaluate your Budget |  |  |  |
| Does this venue fit into your budget? |  |  |  |
| Will you need to outsource for any services and equipment? |  |  |  |
| Number of Guests |  |  |  |
| Can the venue hold the amount of guests you would like? |  |  |  |
| Date and Time |  |  |  |
| Are there other events occurring during this date near the venue? |  |  |  |
| Is the venue available? |  |  |  |
| Will your target audience be able to attend on the date? |  |  |  |
| Services and Equipment Needs |  |  |  |
| A/V capabilities |  |  |  |
| Is parking availability? |  |  |  |
| Are necessary equipment and services included? |  |  |  |
| Is security available? |  |  |  |
| Are there any licenses or permits you will need? |  |  |  |
| Venue Visit |  |  |  |
| Accessibility – is there wheelchair access? |  |  |  |
| Are the washrooms clean? |  |  |  |
| Will you need to plan for the weather? |  |  |  |
| Has the venue hosted similar events before? |  |  |  |
| Revisit service and equipment needs, does the venue provide the necessities within your budget? |  |  |  |
| Are there any restrictions? |  |  |  |
| Emergency exits? |  |  |  |