

Cornwall Federation of Women's Institutes BUDGET FORM FOR SUB-COMMITTEE EVENT

| PLEASE PRINT CLEARLY / ALL RELEVANT AREAS MUST BE | E COMPLETED BEFORE SUBMITTING FOR APPROVAL | | | |
|--|--|--|--|--|
| Sub-committee: | | | | |
| Name of event: | | | | |
| Event venue: | | | | |
| If the event is using an outside organiser or venue, is cancelled? | , will CFWI be fully refunded if the event | | | |
| Day and date of event: | Time of Event: | | | |
| Name of organiser: | | | | |
| Telephone number: | Email: | | | |
| Name(s) of sub-committee member(s) working at event: | | | | |
| | | | | |
| Month(s) to be in County News: | Flyer (other than application) required? | | | |
| Closing day and date (no less than 4 weeks prior to the event): | | | | |
| Will applicants need to send a SASE? Y N | Risk Assessment attached? | | | |
| Any other relevant details: | • | | | |
| | | | | |
| | | | | |

| COSTINGS | ESTIMATED COSTINGS |
|---|--------------------|
| Venue hire | |
| Venue extras (e.g., kitchen, heating, lighting, caretaker) | |
| Equipment (e.g., hire of microphones, projector, tables) | |
| Speakers' fee(s) | |
| Speakers' travel | |
| Additional costs for materials | |
| Photocopying | |
| Prizes/awards | |
| Sub-committee members' travel | |
| Sub-committee members' other expenses (postage, phone, etc.) | |
| If using Chy Noweth out of office hours, add £15 to cover keyholder's travel costs to unlock/lock | |
| Any other expenses (please specify) | |
| CFWI administrative charge (£2 per event) | £2.00 |
| Contingency (please add an adequate "cushion", minimum £20) | |
| ESTIMATED COSTINGS TOTAL | £ |

2 Minimum number of attendees required to make event viable: _____

Maximum number of attendees possible:

| 3 Calculate the suggested minimum charge per attendee using the table below | | | | |
|--|-----|--|--|--|
| Total costings (Section 1) £ divided by minimum viable number (Section 2) | £ | | | |
| Other costs per person (e.g., lunches, admission fees) | + £ | | | |
| Increase per person to help meet your sub-committee's budget (this is essential) | + £ | | | |
| TOTAL PER PERSON MINIMUM CHARGE | = £ | | | |

| 4. Calculate the minimum profit for your event using the table below | | | |
|---|-----|--|--|
| Income from minimum viable number (Section 2) paying minimum per person charge (Section 3) £ | £ | | |
| Any other income (please specify) | + £ | | |
| Income Subtotal | = £ | | |
| Less Total costings (Section 1) | - £ | | |
| MINIMUM PROFIT FOR THE EVENT | = £ | | |

Form completed by: _____

Signature: _____ Date: _____

This form must be countersigned by the sub-committee Chairman or Vice-Chairman

Name: _____

Signature: _____

Date: _____

One copy of this form should be sent to the Federation Office for checking at least one week before the appropriate Board of Trustees meeting.

This portion of the form is for the use of the Board of Trustees. Please leave blank.

| Costings Total (Section 1) | £ | Accepted | Amended to £ |
|----------------------------|---|----------|--------------|
| Minimum Charge (Section 3) | £ | Accepted | Amended to £ |
| Minimum Profit (Section 4) | £ | Accepted | Amended to £ |

Date discussed at Board of Trustees meeting:_