

Games Report



FROM (person reporting): _____
TITLE: _____ REGION #: _____
NAME OF EVENT: _____ EVENT DATE: _____
LOCATION OF EVENT: _____
TIME EVENT BEGINS & ENDS: _____ SET-UP TIME: _____
SIZE OF EVENT - TOTAL # IN ATTENDANCE (estimate) : _____ # OF DAYS: _____
SPONSOR OF EVENT: _____
SPONSOR'S CONTACT PERSON: _____ TEL. _____

MEMBERSHIP

OF NEW MEMBERS _____
OF RENEWALS _____
TOTAL # _____

COST OF EVENT

SPACE RENTAL \$ _____
TENT RENTAL \$ _____
OTHER (specify) _____ \$ _____
TOTAL \$ _____

TOTAL # OF APPLICATIONS DISTRIBUTED: _____

GROSS MERCH. SALES \$ _____

POTENTIAL MEMBERS

WHO EXPRESSED INTEREST IN MEMBERSHIP (from the guest register): _____

NAMES OF TENT/EVENT WORKERS: _____

NAMES OF CCS MEMBERS WHO EXPRESSED AN INTEREST IN VOLUNTEERING:

SUMMARY (include comments & suggestions): _____

OF THIS REPORT SHOULD BE SENT TO THE: 1) VICE PRESIDENT, CCS, NA, AND 2) REGIONAL COMMISSIONER. COPIES

PLEASE RETAIN A COPY FOR YOUR FILES