



2008 RUN/ROLL TENNIS NATIONAL CHAMPIONSHIP SERIES

LOCAL EVENT REPORT FORM



Date: _____

Name of Host Organization _____

Address: _____

Street City ST Zip

Telephone: _____ Fax: _____

Email: _____ Website: _____

Event Location: _____

Title

Address: _____

Street City ST Zip

Amount of grant received: _____ \$

Total event budget: _____ \$

A person should be counted only once in the totals below.

Number of participants **WITH** a physical disability? _____

Number of participants **WITHOUT** a physical disability? _____

Number of staff? _____

Number of volunteers? _____

Number of instructors? _____

Total: _____

Media Received: _____

Was it successful? Why or why not? _____



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What benefits did your organization and your community realize as a result of hosting a Run/Roll Tennis Event?

Name of person submitting report:

Printed Name

Title

Signed:

Signature

Date

Please submit the following items with your report:

- Final Budget
- Participant List (name, address, email, phone, age, & disability)
- Staff List
- Summary of Participant and Volunteer Evaluations
- Media Articles (if any published)
- Short event article w/ photos
- Fliers/brochures and marketing material used to promote event

Thank you for applying for hosting a Run/Roll Tennis Event in conjunction with the 2008 Run/Roll Tennis National Championship Series.

Please submit your completed report form and any additional forms to Dan Humphreys via Fax: 770-434-1167 or Email: Daniel.R.Humphreys@gmail.com within two weeks of the completion of your event.