



Branch #	Branch name:	
Contact person(s) f	or this event:	
Phone number:	Email:	
Proposed dates (id	eally in the fall):	
Location of opening	g ceremonies / banquet:	
Number of hotel roo	oms within 10 minutes of facilities:	
Name(s) of propose	ed hotels and rates (including all taxes):	
1)		Rate:
2)		Rate:
3)		Rate:
Will a block of room	ns be available for participants? $\Box$ Yes $\Box$ No	If yes, how many?
Are there cabs or d	esignated driver programs available? 🛛 Yes 🛛	No
Shuttle service prov	vided: 1) to/from ceremonies? $\Box$ Yes $\Box$ No 2)	to/from bowling alley? $\Box$ Yes $\Box$ No
Bowling alley locati	on:	
Number of lanes av	vailable: Proposed cost per play	ver (for bowling):
# of participants rec	quired to break even on fixed costs (e.g. facility/	equipment rentals, etc.):
Location of closing	ceremonies:	
Add any additional	information that would have the committee color	tween bronch for this event

Add any additional information that would help the committee select your branch for this event. **Please include any host fees and how much you are planning on charging for each meal.**