WBCCI INTERNATIONAL RALLY COMMITTEE REPORT

Committee: _____ Committee # _____

Chairperson: _____ WBCCI # _____

How many years have you been Chairperson? _____ Will you Volunteer again? _____

Is this committee's job description up to date? Yes _____ No _____ Year last updated? _____

Chairperson Contact Informaion

Primary Phone: _____ Email: _____

Committee Needs for next year

Number of Sessions: _____ Length of Session: _____

Number of Tables: _____ Number of Chairs: _____

Minimum Floor Space: _____ Preferred Date & Time: _____

Avoid Conflicts with: _____

Committee Members

Name	WBCCI#	*	Name	WBCCI#	*
		☐			☐
		☐			☐
		☐			☐
		☐			☐

* *Please check box if member is being trained as a replacement.*

Is there any property for this committee? Yes _____ No _____

If yes, attach property inventory form if stored in Property Control. If not, who has the property?

Name & WBCCI #? _____ Phone or Email: _____

Do you need supplies ordered for next rally?

Do you have any suggestions for improvements?

* If more space is needed, please attach additional pages.

Coordinator: _____