

Rolling Plains Longhouse

Activity Summary

Activity Name:_____

Date:_____ **Location:**_____

Sponsoring Tribe:_____

Tribal Contact Person:_____

Telephone:_____

Email address:_____

Event Information:

Big Braves in Attendance:_____ **Little Braves in Attendance:**_____

Charges per Brave:_____

Total cost of Event:_____

Event Revenue:_____

Net Proceeds of Event:_____

Contact Information:

Manager or Group Sales Director:_____

Telephone:_____

Email address:_____

How far in advance need to call to schedule:_____

Things to do in advance of event: _____

Problems encountered with event: _____

Suggestions to improve event for next year: _____

This form should be turned in to the Tallykeeper at the Longhouse Meeting following the event.