



|                |
|----------------|
| DATE OF REPORT |
| MM   DD   YYYY |

## 1. EVENT SUMMARY

|  |  |  |   |                                      |          |
|--|--|--|---|--------------------------------------|----------|
| EVENT                                  |  |  |   |                                      |          |
| <input type="checkbox"/> TWELFTH NIGHT | <input type="checkbox"/> JULY CORONATION | <input type="checkbox"/> A&S CHAMPIONSHIP  | <input type="checkbox"/> CROWN COUNCIL    |                                      |          |
| <input type="checkbox"/> MAY CROWN     | <input type="checkbox"/> SEPTEMBER CROWN | <input type="checkbox"/> AN TIR / WEST WAR | <input type="checkbox"/> OTHER (SPECIFY): |                                      |          |
| DATES OF EVENT                         |  | EVENT LOCATION (SCA BRANCH)                |   | EVENT LOCATION (MODERN CITY OR AREA) |          |
| MM   DD   —   MM   DD   YYYY           |  |  |   |                                      |          |
| TOTAL NUMBER OF ATTENDEES              |  | BREAKDOWN:                                 |   | ADULTS                               | YOUTHS   |
|  |  |  |   |                                      | CHILDREN |
| TOTAL INCOME \$                        |  | TOTAL EXPENSES \$                          |   | TOTAL PROFIT / (LOSS) \$             |          |

## 2. ACTIVITIES

| TOURNAMENTS                      | NUMBER OF PARTICIPANTS | WAR                              | NUMBER OF PARTICIPANTS | OTHER                                    | NUMBER OF PARTICIPANTS |
|----------------------------------|------------------------|----------------------------------|------------------------|--|------------------------|
| <input type="checkbox"/> HEAVY   | _____                  | <input type="checkbox"/> HEAVY   | _____                  | <input type="checkbox"/> BARDIC          | _____                  |
| <input type="checkbox"/> RAPIER  | _____                  | <input type="checkbox"/> RAPIER  | _____                  | <input type="checkbox"/> ARTS & SCIENCES | _____                  |
| <input type="checkbox"/> ARCHERY | _____                  | <input type="checkbox"/> ARCHERY | _____                  | <input type="checkbox"/> CLASSES         | _____                  |
|                                  |                        |                                  |                        | <input type="checkbox"/> OTHER           | _____                  |
|                                  |                        |                                  |                        | <input type="checkbox"/> OTHER           | _____                  |

SPECIFY OTHER: \_\_\_\_\_

### FOR ANY ACTIVITY THAT WAS A COMPETITION (WAR, TOURNAMENT, BARDIC COMPETITION, ETC.) PLEASE LIST THE WINNER

| ACTIVITY | WINNER | ACTIVITY | WINNER |
|----------|--------|----------|--------|
|          |        |          |        |
|          |        |          |        |
|          |        |          |        |
|          |        |          |        |
|          |        |          |        |

## 3. STAFF INFORMATION

|                                 |                                    |              |
|---------------------------------|------------------------------------|--------------|
| AUTOCRAT (SCA NAME)             | AUTOCRAT (MODERN NAME)             | PHONE NUMBER |
| CO-AUTOCRAT (SCA NAME)          | CO-AUTOCRAT (MODERN NAME)          | PHONE NUMBER |
| MARSHAL IN CHARGE (SCA NAME)    | MARSHAL IN CHARGE (MODERN NAME)    | PHONE NUMBER |
| CHIRURGEON IN CHARGE (SCA NAME) | CHIRURGEON IN CHARGE (MODERN NAME) | PHONE NUMBER |
| MERCHANT COODINATOR (SCA NAME)  | MERCHANT COODINATOR (MODERN NAME)  | PHONE NUMBER |
| LIST PERSON (SCA NAME)          | LIST PERSON (MODERN NAME)          | PHONE NUMBER |
| HERALD (SCA NAME)               | HERALD (MODERN NAME)               | PHONE NUMBER |
| CHIEF COOK (SCA NAME)           | CHIEF COOK (MODERN NAME)           | PHONE NUMBER |
| OTHER (SCA NAME)                | OTHER (MODERN NAME)                | PHONE NUMBER |

|   |
|---|
| REPORTS ATTACHED  |
| <input type="checkbox"/> MARSHAL <input type="checkbox"/> LISTS <input type="checkbox"/> HERALD <input type="checkbox"/> OTHER (SPECIFY)<br><input type="checkbox"/> CHIRURGEON <input type="checkbox"/> MERCHANT <input type="checkbox"/> CHIEF COOK |

#### 4. GENERAL INFORMATION

|   |                  |   |  |   |   |
|---|------------------|---|--|---|---|
| SITE ADDRESS  |                  |   |  |   |   |
| SITE CONTACT NAME   |                  |   | SITE CONTACT PHONE NUMBER  |   | SITE CONTACT EMAIL  |
| TIME SITE OPENED  | TIME SITE CLOSED | TYPE OF EVENT<br><input type="checkbox"/> CAMPING <input type="checkbox"/> INDOOR | FEAST<br><input type="checkbox"/> YES <input type="checkbox"/> NO                  | DID YOU HAVE ENOUGH VOLUNTEERS?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (EXPLAIN IN SECTION # OR ATTACH REPORT) |   |
| IF NO TO ANY OF THE FOLLOWING, REPORT IN SECTION 9 OR ATTACH A SEPARATE REPORT: |                  |   | WAS THE SITE ADEQUATE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | WAS THERE ENOUGH PARKING?<br><input type="checkbox"/> YES <input type="checkbox"/> NO   | WOULD YOU RECOMMEND THIS SITE FOR FUTURE USE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |

#### 5. GATE RECORDS

FUNDS LISTED ARE IN:  U.S.     CANADIAN

|   | MEMBERS | NON-MEMBERS | NMS | GATE FEE | INCOME |
|---|---------|-------------|-----|----------|--------|
| ADULT (FULL FEE)                      AGE FOR FULL FEE:         |         |             |     |          |        |
| ADULT (COMPENSATED – NO FEE)                                    |         |             |     |          |        |
| YOUTH (DISCOUNTED FEE)              AGE RANGE FOR YOUTH FEE:    |         |             |     |          |        |
| YOUTH (COMPENSATED – NO FEE)                                    |         |             |     |          |        |
| CHILD (DISCOUNTED FEE)              AGE RANGE FOR CHILD FEE:    |         |             |     |          |        |
| CHILD (NO FEE)                      AGE RANGE FOR CHILD NO FEE: |         |             |     |          |        |
| CHILD (COMPENSATED – NO FEE)                                    |         |             |     |          |        |
| FAMILY CAP  |         |             |     |          |        |
| <b>TOTALS</b>   |         |             |     |          |        |

#### 6. FULL INCOME

|                                 |  |
|---------------------------------|--|
| GATE INCOME (NOT INCLUDING NMS) |  |
| FEAST INCOME (IF APPLICABLE)    |  |
| OTHER (SPECIFY):                |  |
| OTHER (SPECIFY):                |  |
| <b>TOTAL INCOME</b>             |  |

#### 7. EXPENSES

|                                       |  |
|---------------------------------------|--|
| SITE RENTAL (INCLUDING DEPOSIT)       |  |
| INSURANCE CERTIFICATE (IF APPLICABLE) |  |
| PORTABLE TOILETS (IF APPLICABLE)      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| OTHER (SPECIFY):                      |  |
| <b>TOTAL EXPENSES</b>                 |  |

#### 8. TOTAL PROFIT / (LOSS)

|                              |  |
|------------------------------|--|
| <b>TOTAL PROFIT / (LOSS)</b> |  |
|------------------------------|--|

**9. NOTES (if space is insufficient, attach separate document)**

WHAT CHALLENGES DID YOU FACE WITH THIS EVENTS?

HOW WOULD YOU AVOID THESE CHALLENGES?

WHAT WORKED WELL AT THIS EVENT?

WHAT WOULD YOU DO DIFFERENTLY?

NOTES ON THE SITE

SUGGESTIONS FOR NEXT TIME