

## REGIONAL RALLY CHECKLIST (due by December 15th, 2008)

LOCATION	
Facility Name:	Proposed Date:
Address:	
Driving Directions:	
Motels within 20 kms:	
Area Restaurants:	
Area Attractions:	
CMA Contact:	

COST			
Building Fee \$			
Dorm \$	# Avail:	Linens:	Bed Size:
Camp Sites	Tent \$	# Avail:	Restroom/Shower:
	RV \$	# Avail:	Restroom/Shower:
Meals Available:		Cost \$	
Additional Costs:			

FACILITY SET-UP			
Worship Room Capacity:		Registration Room/Bldg:	
Space For:			
Goodies <input type="checkbox"/> Y <input type="checkbox"/> N	Hospitality <input type="checkbox"/> Y <input type="checkbox"/> N	Prayer Room <input type="checkbox"/> Y <input type="checkbox"/> N	Bike Games <input type="checkbox"/> Y <input type="checkbox"/> N
Children's Ministry <input type="checkbox"/> Y <input type="checkbox"/> N	Bonfire Area <input type="checkbox"/> Y <input type="checkbox"/> N		
Available:			
Tables <input type="checkbox"/> Y <input type="checkbox"/> N	Chairs <input type="checkbox"/> Y <input type="checkbox"/> N	Sound Equipment <input type="checkbox"/> Y <input type="checkbox"/> N	Kitchen <input type="checkbox"/> Y <input type="checkbox"/> N
Screen <input type="checkbox"/> Y <input type="checkbox"/> N	Projector <input type="checkbox"/> Y <input type="checkbox"/> N	Picnic Tables <input type="checkbox"/> Y <input type="checkbox"/> N	

SUPPLIES			
Coffee Pot (100 cup) <input type="checkbox"/> Y <input type="checkbox"/> N	Cold Water Jugs <input type="checkbox"/> Y <input type="checkbox"/> N	Ice <input type="checkbox"/> Y <input type="checkbox"/> N	Shade <input type="checkbox"/> Y <input type="checkbox"/> N

Submitted By: \_\_\_\_\_

Date: \_\_\_\_\_