NEW DISTRICT COMMITTEE CLASS SITES WORKSHEET

3. Identify Suitable Class Sites

Location Name:_____

Location Address:_____

City, State, Zip:_____

Contact Person:_____

Contact Phone: ( ) _____ Fax: ( ) _____

Audio/Visual Equipment on site ..... Y / N Chairs and Tables on site ..... Y / N

Respected by local industry ..... Y / N Is clean and well organized ..... Y / N

Equipped with necessary equipment ..... Y / N Has adequate parking ..... Y / N

Site Manager has agreed to class times and dates ..... Y / N

Location Name:_____

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