

WOMAN'S CLUB OF WASHINGTON UNIVERSITY EVENT REPORT

Please complete and return to the President and WC Coordinator once your event is completed.

- 1. EVENT NAME:**
- 2. DATE:**
- 3. LOCATION or FORMAT (eg. Zoom):**
- 4. NUMBER OF ATTENDEES:**
- 5. NAMES OF ATTENDEES, if available:**
- 6. 3 – 5 PICTURES with faces and names attached as separate files (e.g. JPEG/JFIF) or link for recorded event. In file**
- 7. PROVIDE A BRIEF DESCRIPTION OF THE EVENT FOR HISTORICAL PURPOSES:**
- 8. Informal feedback received about the event and/or on a scale of 1 – 5, with 1 being the worst and 5 the best, how well was the event received.**
- 9. If appropriate for your event,**
 - a. Budgeted cost of event:**
 - b. Actual cost of event:**