

TAHPERD WORKSHOP APPLICATION

Name:

Date:

Telephone:

Email:

Are you a current TAHPERD member?

WRITE A BRIEF DESCRIPTION OF THE CORE ASPECTS OF THE PROPOSAL

Location:

Time

Length:

Registration Fee:

STATE THE PURPOSE OF YOUR PROPOSAL

WHAT ARE THE INTENDED OUTCOMES OF THIS PROJECT?

STATE THE INTENDED AUDIENCE AND/OR COMMUNITIES TO BE SERVED.

BUDGET: PLEASE SPECIFY approximate expenses

Item	Quantity	Cost/Item	Total cost of Item
Presenters			
Facility			
Lunch			
Handouts			
Memberships			
Printing			
Door Prizes			
Insurance			
Total cost			

Notes to add:

Budget: Please specify approximate income

Item	# of attendees	Registration fee	Total income
Participants			
Grants			

Notes to add: