



Post Event Report to Executive Council
from Designated Event Supervisor
(Please fill out and give to Stated Clerk for his/her records)

Event _____

Date _____

Location _____

Designated Event Supervisor _____

First Aid Provider _____

Number children/Youth Attending, including Youth Council _____

Number Child/Youth Workers (adult staff and/or adult volunteers) _____

_____ Did all Child/Youth Workers have background checks reported?

_____ Was there an orientation for Child/Youth Workers?

_____ Was there an orientation for participants?

_____ Were there any reportable incidents? If so, please attach the Incident report.

Please describe any issues which arose that needed attention?

Please describe any corrective actions which took place.

What suggestions do you have for future events?