

PROGRAMME PLANNING FOR THE UNIT

UNIT PROGRAMME

DATE: _____ THEME: _____ CONTACT PERSON: _____

TIME	ACTIVITY	EQUIPMENT NEEDED	PROGRAMME MISSION

Invested: _____

Badges Awarded: _____

Birthdays: _____

Attendance: _____ No. in attendance: _____ Total Membership: _____

Announcements: _____

Comments and notes: _____