



PO Box 149
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EVENTS FINAL REPORT

Workshop / course/training
 (please circle appropriate categories)

Name:	
Organisation (if applicable):	
Email:	
Ph:	Mob:
Event title:	
Date & time of event	Cost per participant:
No. of participants:	Fee for site use:
How & where did you promote the event:	
Briefly describe outcomes:	
Did you receive sufficient support from Mullum SEED? <input type="checkbox"/> Yes <input type="checkbox"/> No How could Mullum SEED improve support?	

Please attach any photos or additional materials for our records.

Signed

Date:

Office use only:
 Date Fee paid

Receipt no.

Date Stats recorded