

The Desert-Singles Activities Form

To be completed by hosts of all social events and happy hours

Date of Event: _____

Time of Event: From _____ To _____

Title of Event: _____

Event Venue Address and Directions: _____

Meeting Place at Venue (on the patio, NE corner of the parking lot, etc):

Cost (if any): _____

Description of the Event: _____

Name of Primary Contact (PC): _____

Phone # of PC: _____ email address of PC _____

Name of Secondary Contact (SC): _____

Phone # of SC: _____ email address of SC _____

Other information: _____
