



quarter _____

Club's Name _____

Director _____

Director's phone number / e-mail _____

Number of Adventurer _____

Number of Staff member _____

Number of families served _____

Meeting's day _____

Time of meetings _____

Number of meetings during the quarter _____

Has there been any progressive classes during the quarter Yes No

Number in each classes	Boys	Girls
Little Lambs	_____	_____
Eager Beavers	_____	_____
Busy Bees	_____	_____
Sunbeams	_____	_____
Builders	_____	_____
Helping Hands	_____	_____
Helping Hands Advanced	_____	_____

Any awards given? Yes No
If yes, which ones?

1. _____
2. _____
3. _____
4. _____
5. _____

Arts and crafts done. If yes list the crafts. Yes No



- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Outings.

Yes No

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

**Has there been any
parent/child activities this
quarter?**

Yes No

**network meetings this quarter?
If yes, list the subjects.**

Yes No

To submit the 5th of the first month in the next quarter.