



2016 AMTA CT Sports Massage Team Coordinator's Event Report

Please complete and Email (as an attachment) this Report to

<mailto:Sportsdirector@amtactchapter.org> within **7 Days** of Your Event

Your Report should include:

Event Name:

Location:

Coordinator's Name:

Event Date & Weather

Messages Given:

Aprox. # of Event Participants:

Event Coordinator's Recap for Website & Newsletter:

(Please include # of LMT's & Names, # of Red Shirts & Names, # Students, Instructor & Names)