

# Chapter Planning Session

Chapter: \_\_\_\_\_ University: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

## Schedule (pick one):

Friday evening (5:00-9:00 pm) through Saturday (8:30 am-5:30 pm) \_\_\_\_\_  
Dates

Saturday (8:30 am-5:30 pm) through Sunday (8:00 am-Noon) \_\_\_\_\_  
Dates

Weekdays Noon to Noon \_\_\_\_\_  
Dates

***Flight arrangements will be made based on the schedule selected above. Any cancellations must be made five or more days in advance. Any cancellation or change fees will be billed back to the chapter.***

**Chapter needs to make reservations for Zane Akins nearby, preferably with an alumnus, and provide transportation, if possible.**

Alumnus or hotel: \_\_\_\_\_ Reservation made for nights of \_\_\_\_\_

Phone: \_\_\_\_\_ Confirmation #: \_\_\_\_\_

Address: \_\_\_\_\_ City, St, Zip: \_\_\_\_\_

Transportation Provided? \_\_\_\_\_ If yes, contact person: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Participants: Somewhat equal number of undergraduate leaders and alumni representatives (Minimum of 5 each with no Maximum). List additional participants on a second page.**

Undergraduates/office

Alumni representatives/office

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |
| 7. | _____ | _____ |

**Meeting space (to be provided by Chapter). A location other than chapter house is preferred to minimize interruptions and distractions.**

- \_\_\_\_\_ Open U table set-up with chairs on the outside.
- \_\_\_\_\_ Flip charts (2) on easels, markers, and masking tape.
- \_\_\_\_\_ Writing paper for attendees and index cards for nametags.
- \_\_\_\_\_ Screen and projector.
- \_\_\_\_\_ Laptop or computer with PowerPoint with someone to prepare the plan as developed and project on the screen. (To be printed out later if printer not available).
- \_\_\_\_\_ Lunch and/or dinner either catered or location selected in advance.

**Please return to the Home Office: Fax: 816-891-9401 or E-mail: [Rachelle@AlphaGammaRho.org](mailto:Rachelle@AlphaGammaRho.org)**