

BACC LOCATION RESEARCH FORM

Ambassador's Name and Phone Number _____

NAME OF LOCATION _____

ADDRESS _____

CONTACT PERSON _____ Date of contact _____

PHONE NUMBER _____

OCCUPANCY OF ROOM _____

DAYS OF WEEK AVAILABLE _____ WEEKENDS? _____

TIMES AVAILABLE _____ EVENINGS? _____

UNAVAILABLE DATES OR TIMES _____

QUANTITY OF PARKING AVAILABLE _____

LOTS, STREET PARKING, or BOTH _____

PARKING ON WEEKEND _____

RESTROOMS ON SITE _____

EQUIPPED FOR POWERPOINT (outlets, screen, projector) circle _____

CHAIRS AND TABLES AVAILABLE _____ Set up already? _____

ACCESSIBLE BY PUBLIC TRANSPORTATION _____

HANDICAP ACCESSIBLE _____

INTERESTED IN HOSTING BACC (The actual court) _____

INTERESTED IN HOSTING BACC Board/Planning meetings _____

PERSONNEL ON SITE _____

HOW DO WE RESERVE THE ROOM (written request, phone call etc.) _____

NAME OF LOCATION _____

ADDRESS _____

CONTACT PERSON _____ Date of contact _____

PHONE NUMBER _____

OCCUPANCY OF ROOM _____

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