

## **EVENTS FINANCIAL REPORT FORM**

EVENT: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_\_

COMPETITION DIRECTOR: \_\_\_\_\_

# OF ATHLETES \_\_\_\_\_\_ # OF JUDGES \_\_\_\_\_\_

COMPETITION FEE: \$\_\_\_\_\_ ADMISSION FEE: \$\_\_\_\_\_

## Expenses:

Venue Rental: \$
Venue Staff/ labor/ security: \$
Equipment Rental/ shipping: \$
Audio Equipment: \$
Marketing: \$
Internet: \$
Scoring: \$
Staff: \$
Office Supplies: \$
Awards/ Banners: \$
Participant Gifts: \$
Decorations/ Supplies: \$
Medical/ Trainer \$
Judging Fees: \$
Judges Transportation: \$
Judges Hotel: \$
Judges Hospitality: \$
Coaches Hospitality: \$
Refunds: \$

## Income:

Registration/ Entry Fees: \$
Spectator Admission: \$
Program Sales: \$
Program Ads/ Candy Grams: \$
Concessions: \$
Vendor Commissions: \$
Sponsors: \$
Donations: \$
Other (specify):

Income: \_\_\_\_\_

Expenses: \_\_\_\_\_

Total Profit:

Competition Director Signature

Other (specify): \_\_\_\_\_

Please email final report within 45 days following the event to: lbarclay@nationalgym.org