



ACTIVITY SCHEDULE FORM

2016-2017 Season

Today's Date: _____

ACTIVITY: _____

LOCATION of the activity: _____

DAY(S) of the WEEK: _____

{Or DATE of one-time event} _____

TIME

(Example: Set-up time is 1:00PM, but on the schedule you'd like your activity to be listed as starting at 1:30 → Set-up: 1PM, Start Time: 1:30, End Time: 2:30, Clean-up until: 3)

Set-up time begin: _____

Clean-up until: _____

ACTIVITY START TIME: _____

ACTIVITY END TIME: _____

Date of first session: _____

Last session: _____

Is this activity the exact same as scheduled last year? (circle)

YES

NO

Name of Chairperson: _____

Email address: _____

Phone #: _____

Name of Co-Chairperson: _____

Email address: _____

Phone #: _____

Thank you in advance for volunteering! With over 85 activities a week, our rooms get busy and need to be scheduled in advance. Please turn in a Schedule Form even though you've reserved the same room every season. Activities that were scheduled the season prior will have priority when creating the schedule. All other activities will be scheduled on a first-come first-serve basis on when the form was turned in.

Thank you for making the Tip O' Texas a great community!

Please return this completed form to the Activities Office, or email a copy to:

activitiesoffice@tipotexasrv.com

December 2016							January 2017							February 2017							March 2017											
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa					
			1	2	3		1	2	3	4	5	6	7			1	2	3	4										1	2	3	4
4	5	6	7	8	9	10	8	9	10	11	12	13	14	5	6	7	8	9	10	11	5	6	7	8	9	10	11					
11	12	13	14	15	16	17	15	16	17	18	19	20	21	12	13	14	15	16	17	18	12	13	14	15	16	17	18					
18	19	20	21	22	23	24	22	23	24	25	26	27	28	19	20	21	22	23	24	25	19	20	21	22	23	24	25					
25	26	27	28	29	30	31	29	30	31					26	27	28					26	27	28	29	30	31						