

CHAPTER OUTREACH PROJECT SHARING FORM

The following is a sample report form which may be used but is not required. A short paragraph to tell what's happening in your community or region outreach projects will suffice.

Chapter: _____ Region: _____ # of chapter members: _____

Name of Project: _____

Completion Date: _____ Chapter Outreach Chair's Name: _____

E-mail: _____ Address: _____

Beneficiary/Recipient of Project: _____

1. How was project financed? Chapter Budget: _____ Fundraising: _____

Stitchers: _____ Donations from outside sources: _____ Other: _____

2. Final cost: _____ Gross: _____ Net: _____

3. Objectives: Benefit the chapter: _____ Involve More Members: _____

Find New Members: _____ Other: _____

4. Number of Members who participated: _____ Number of Hours Donated: _____

5. Special skills or techniques required: _____

6. Special supplies required: _____

7. Patterns and/or instructions available for sharing: _____

8. Mailing costs: Material _____ Postage: _____

9. Additional information that might help a chapter decide whether they could successfully complete this project: _____

Please send this completed form to your **Region Outreach Chair**

This document can also be found by right clicking the hyperlink:

[Anc_2.1.6.2.4-Outreach-Project-Sharing-Form.pdf \(egausa.org\)](#)



Stitch in Public Day – Chapter Activity Report

Chapter: _____ Region: _____

Chapter City / State: _____ Date of Event: _____

Venue Type (ex.: museum, shop, mall, library, fair, church) _____

Venue Name: _____

Location: (City / State) _____

Total number of EGA members participating: _____

Total number of volunteer hours: _____

Did you provide a flyer / brochure about EGA / your chapter? Yes ____ No ____

Did you use giveaways: Yes ____ No ____

Please list the giveaways: _____

Did you have merchandise for sale? Yes ____ No ____

What did you offer for sale? _____

Do you feel that your participation in Stitch in Public day was worthwhile for your chapter? If yes, how? If no, please explain. _____

What can EGA do to help your chapter participate in the future: _____

Chapter Contact Name: _____ Address: _____

Email: _____

Please send your completed form to your Region Outreach Chair.

You may also right click on the link below to access this form and a picture of a sample flyer.

[Stitch-in-Public-Day-Report-Form-2021.pdf \(egausa.org\)](#)

[EGA-StitchinPublicDay-Flyer-1.pdf \(egausa.org\)](#)