

## Sports Team Survey

Team Name:			_
City of Origin:		State:	
No. of Athletes:	No. of Coa	ches:	
No. of Spectators: Youth	Adult		
Are you staying in paid accomm	odations?	Yes	No
Type of accommodation: Ho	otel/Motel	Condo	Vacation House
If Vacation House (Airbnb/VRB	O/etc.), please	write out add	Iress(es) of home(s):
If Hotel/Motel or Condo, please			 iion:
Address of Hotel/Motel/Condo	or approximat	e distance fror	n venue (in minutes):
How many nights will your team			
Estimated No. of rooms (or bed	rooms) ner nig	ht:	

Information garnered from this document will only be used for economic impact purposes. The collection of this information is crucial for the future success of this event. Thank you for your participation.