



**LIONS INTERNATIONAL DISTRICT 201 N5
EMERGENCY COMMITTEE
SUPPORT DE-BRIEFING FEEDBACK SHEET**



Details of Support Activities Provided:

Date:

Club:

Region No:

Location:

Type of Support Provided:

Approximate Number of Members who Attended:

Venue:

Address:

Duration of Support provided:

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Feedback on Support Activities:

Positive Aspects:

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Negative Aspects:

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Recommendation:

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Club/Emergency Committee Representative:

(Name and signature)