

# Seminar Recap Report

*(To be filled out by the Presenter after the event and faxed or mailed to NCBP.)*

Presenter Name: \_\_\_\_\_

Seminar Location: \_\_\_\_\_

Seminar Date: \_\_\_\_\_

Number of Couples: \_\_\_\_\_ Number of Single Parents: \_\_\_\_\_ Total Attendance: \_\_\_\_\_

Number of Children in Attendance: \_\_\_\_\_

Total Amount Paid to Presenter: \_\_\_\_\_

Resource Income Total: \_\_\_\_\_

### Comments:

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Please submit this form to the National Center for Biblical Parenting along with On-Site Purchase Forms that contain credit card information or orders.



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