

MULTIPLICATION CHECKLIST

Small Group Leader _____

Apprentice _____

Coach _____

Current Group Size _____

GROUP ONE

Leader _____

New Host _____

Location _____

Day & Time _____

Master Planning Sheet Complete ☐ Yes ☐ No

GROUP TWO

Leader _____

New Host _____

Location _____

Day & Time _____

Master Planning Sheet Complete ☐ Yes ☐ No

BIRTH DATE _____

GROUP BREAK DOWN

GROUP 1	GROUP 2