



TOTAL BRAIN HEALTH[®] FAIR WORKSHEET

TBH[®] FAIR PLANNING WORKSHEET

I. EVENT LOGISTICS

EVENT NAME: _____

SPECIAL THEME: _____

DATE: ____/____/____ TIME: _____ CONFIRMED? YES ____ NO ____

EVENT LOCATION (CHECK CONFIRMED LOCATION):

____ LOCATION 1: _____ FEES: _____

____ LOCATION 2: _____ FEES: _____

____ LOCATION 3: _____ FEES: _____

INTENDED AUDIENCE (LIST POTENTIAL SOURCES FOR ATTENDEES):

II. EVENT CONTENT

KEYNOTE SPEAKER OR PANELIST (CHECK CONFIRMED SPEAKER(S)):

____ SPEAKER 1: _____

EXPERTISE: _____ ESTIMATED FEE AND EXPENSES: _____

____ SPEAKER 2: _____

EXPERTISE: _____ ESTIMATED FEE AND EXPENSES: _____

____ SPEAKER 3: _____

EXPERTISE: _____ ESTIMATED FEE AND EXPENSES: _____



TOTAL BRAIN HEALTH[®] FAIR WORKSHEET

TBH[®] STATIONS: POPULAR TOPICS

- HIGHLIGHT STATIONS OF INTEREST
- CHECK CONFIRMED STATIONS

SUGGESTED TOTAL BRAIN HEALTH STATIONS BY THEME

BODY	MIND	SPIRIT
DANCE AEROBICS	JUGGLING*	AROMATHERAPY*
ZUMBA [®]	CARTOONING	YOGA*
SIT AND BE FIT	WORD SCRAMBLE	CHAIR YOGA*
JUGGLING*	BRAINY BOARD GAMES	TAI CHI*
WII PROGRAM	6 WORD AUTOBIOGRAPHY	7 WORDS OF WISDOM*
YOGA*	7 WORDS OF WISDOM*	VOLUNTEER CRAFT ACTIVITY
CHAIR YOGA*	COLLAGE ART	POETRY JAM*
TAI CHI*	CONDUCTORCIZE [®]	MEDITATION STATION
CALISTHENICS	BRAINY SOFTWARE STATION	VOLUNTEER INFO TABLE
BALLROOM DANCING	POETRY JAM*	HAND MASSAGE*
HAND MASSAGE*	CANDLE MAKING	REFLEXOLOGY*
REFLEXOLOGY*	CIRCLE DRUMMING	CIRCLE DRUMMING
AROMATHERAPY*	SING-A-LONG	PLANTING TABLE
BRAIN HEALTHY EATING	THE WIZ QUIZ [®]	
MEDICATION TABLE	MEMORY SCREENING	
BLOOD PRESSURE		
SCREENING		
FALLS PREVENTION TABLE		*ACTIVITIES 2+ THEMES
OTHER STATIONS: HEALTH INFORMATION TABLE, PROGRAM INFORMATION TABLE, BOOK SALES TABLE (WITH LOCAL BOOKSTORE), SPONSOR/PARTNER INFORMATION TABLE, FEEDBACK TABLE		



TOTAL BRAIN HEALTH[®] FAIR WORKSHEET

TOTAL BRAIN HEALTH[®] STATIONS

You will need a TBH Station Expert and One Volunteer Per Station. You will also need at least one “floater” volunteer per 25 attendees to help direct the flow and answer questions during the event.

STATION 1	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 2	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	



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STATION 3	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 4	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 5	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	



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STATION 6	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 7	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 8	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	



TOTAL BRAIN HEALTH[®] FAIR WORKSHEET

SPECIAL CONSIDERATIONS	
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STATION 9	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 10	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 11	
TOPIC	
MAIN EXPERT	
FEE	



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VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 12	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 13	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 14	
TOPIC	
MAIN EXPERT	



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FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 15	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	

STATION 16	
TOPIC	
MAIN EXPERT	
FEE	
VOLUNTEER STAFF	
REQUIRED SUPPLIES	
SPECIAL CONSIDERATIONS	



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III. INCENTIVE PROGRAM

INCENTIVE PROGRAM PLAN: _____

STAFF: _____

SUPPLIES: _____

INCENTIVE PROGRAM PRIZE (CAN BE RAFFLED OFF TO ELIGIBLE PARTICIPANTS):

IV. FINANCIAL CONSIDERATIONS

Event Support	Estimate 1	Estimate 2	Actual
Registration Fees			
Grant Funding			
Budgetary Contributions			
Sponsors/Partners Support			
Other Support Sources			
<i>Advertising Fees</i>			
TOTAL			

Event Costs	Estimate 1	Estimate 2	Actual
Keynote Fee and Expenses			
Outside Experts Fees			
Rental Fees			
Supplies			



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Food Costs			
Advertising			
<i>Additional Costs</i>			
TOTAL			

V. SPONSORS AND PARTNERS (CHECK ALL CONFIRMED):

___ SPONSOR/PARTNER 1 _____

EXPERTISE: _____

CONTRIBUTION: _____

___ SPONSOR/PARTNER 2 _____

EXPERTISE: _____

CONTRIBUTION: _____

___ SPONSOR/PARTNER 3 _____

EXPERTISE: _____

CONTRIBUTION: _____

ADDITIONAL DETAILS:
