

EVENT REQUEST FORM



www.pagrandlodge.org

1-800-266-8424

DDGM Name:	District #	Phone:
Host Lodge (s)		
Contact Info: Name(s)		
Phone:	Email:	
Event Info: Date(s):	Times(s)	
Name of Facility Hosting Event:		
Facility Address:		
City:	State:	Zip:
County:		

OPERATION NOTES:

How many children are estimated for this event?

How many CHIP event experienced volunteers do you have?

How many trained camera operators do you have for this event?

Do you have more volunteers that need training?

How many CHIP cameras do you have available for this event?

How many complete CHIP packets do you have for this event?

OPEN TO PUBLIC:

CLOSED TO PUBLIC:

Additional Info: