



Host Contact Information

Date _____ Information Taken By _____

Scheduled Date _____ **Hours** _____

District # _____ Lodge _____

Host Organization _____

Location _____ Contact Person _____

Complete Address _____

(H) _____ (B) _____ (Cell) _____

Estimated Number of Children _____ Actual _____ Ages _____

Are there children with special needs involved (hearing or speech impaired, do not speak English)? _____ If so, will the organization supply the interviewers? _____

Will a press release be sent? _____ By Whom: _____

List of Newspapers, TV & Radio Stations to be sent releases:

Will the organization require advance release forms? _____ How Many? _____

Date the advanced releases, signs and posters are to be delivered? _____

Will the organization have people to assist? _____ How Many? _____