Grand Function Notification
Request form for the 20_____ - 20_____ year

Grand Pup Tent of _____ City of Event:_____

Event Dates: _____ to _____ Scratch Date: _____

Event is a Grand: ☐ C of A ☐ Midwinter ☐ Convention

☐ Other _____

Headquarters hotel/motel: _____

Name/City of nearest airport: _____

The scratch will be held at: _____

Grand Event Chairman: Name: _____
Address: _____
Email: _____
Phone: _____

Will you be doing: ☐ Hospital Work ☐ Memorial Service ☐ Big Boot Project

Installing Officer (if applicable): _____

The Grand will provide:

- Transportation (to/from airport): _____(POC)
- Hotel Accommodations: _____ (number of nights)
- Banquet/Meal Ticket(s): _____ (number of tickets)
- Other: _____

If you have a preference of Supreme visiting officer or Past Supreme Commander, please list below:

- _____
- _____
- _____

(We will do our best to honor your request.)

Yours in LOTCS,
Grand Commander (name/contact information) Date: _____

Name: _____

Contact Information: _____

Attach an itinerary (with uniform of the day) and registration form about the event with this document or send it to the Supreme Adjutant as it becomes available.

Return this form to the Supreme Adjutant: Traci Williams at mocsupremeadjutant@gmail.com.