

PLEASE RETURN TO VISITING OFFICER BY JULY 15

OFFICIAL VISIT INFORMATION

CHAPTER: _____ CITY: _____

PRESIDENT'S NAME _____ EMAIL ADDRESS _____

ADDRESS _____

PHONE # (H) _____ (W) _____ (C) _____

	CHAPTER OFFICER	PRO TEM FOR MEETING	PRO TEM FOR INITIATION
PRESIDENT	_____	_____	_____
VICE PRESIDENT	_____	_____	_____
RECORDING SECRETARY	_____	_____	_____
CORRESPONDING SECRETARY	_____	_____	_____
TREASURER	_____	_____	_____
CHAPLAIN	_____	_____	_____
GUARD	_____	_____	_____
MEMBERSHIP CHAIRMAN	_____		

NOTE: The officers' conference and chapter meeting should be at the same location. Allow 15-20 minutes between the officers' conference and social time or meeting.

1) OFFICERS' CONFERENCE Day: _____ Date: _____ Time: _____

Name of Hostess: _____ Phone # _____

Address: _____ Email: _____

2) SCHEDULED MEAL OR BREAK TIME: _____

3) CHAPTER MEETING Day: _____ Date: _____ Time: _____

Name of Hostess: _____ Phone # _____

Address: _____ Email: _____

4) HOUSING ARRANGEMENTS: NEEDED (yes) _____ (no) _____ Date needed: _____

Name of Hostess: _____ Phone # _____

Address: _____ Email: _____