

15TH DISTRICT TYPED RITUAL RESERVATION REQUEST

FROM: LODGE _____ # _____

DATE _____

NAME OF REQUESTER: _____ OFFICE HELD _____

PHONE# OF REQUESTER _____

EMAIL OF REQUESTER _____

ADDRESS OF REQUESTER _____

DATE REQUESTED TO PICKUP RITUAL _____

MEETING DATE RITUAL WILL BE USED _____

DATE OF RITUAL RETURN _____

NAME OF PERSON TO PICKUP AND RETURN RITUAL _____

PLEASE Phone or email the above request information to: MICHAEL DODDS DISTRICT ADVISOR

PHONE 937-441-5562

EMAIL: mdodds@centurylink.net

NOTE: District Advisor resides in DeGraff, OH This will be the point for pick-up and return for the Ritual.

DO NOT MARK OR WRITE IN THIS RITUAL.

PLEASE RETURN RITUAL ON DATE PROMISED SO THE NEXT REQUESTOR WILL NOT HAVE TO WAIT FOR ITS RETURN.