

MOOSE RIDE 4 KIDS EVENT NOTIFICATION FORM

Lodge # _____ City _____ State _____

Moose Rider Chairman _____

MR4K Event Contact Name _____

Contact Email _____

Phone _____ Cell _____

Number of Moose Rider Members _____

Administrator _____

Website address _____

Event Info

Lodge Address _____

Office Phone _____ SQ Phone _____

Type of Event & Other Notes (Specify second charity in addition to Mooseheart)

Regional Manager _____

This form is to be filled out and sent to:
Membership Department, Attn: Moose Riders
Moose International, 155 S. International Dr. Mooseheart, IL 60539-1183