MOWA Choctaw Visit - Information Form

Group	of Meeting or Organization: D Leader or Contact Person:
	act Phone Number: Number in Group:
Conta	act Email Address:
Dates	s of Trip:
Type of Group: (ex. Youth, Young Adults, Adults, Married Couples, etc)	
Estim	nated Arrival: Date: Time:
Form of Transportation: Drive: Fly: Flight #:	
Estimated Departure: Date: Time:	
What	is your group interested in doing? (Check all that apply)
0	Visiting the site
0	General Maintenance Projects
0	Leading Youth Group, Bible Study, etc.
	Organizing and Helping with Rummage Sale
0	Organizing and Holping With Raminago Galo
0	Helping with After-School Tutoring Program
0	Helping with After-School Tutoring Program
0	Helping with After-School Tutoring Program Construction Work
0	Helping with After-School Tutoring Program Construction Work