



**Association Youth Awareness Congress  
Chairman's Report**

**\*\*\*\*\*MANDITORY\*\*\*\*\***

**this report must be returned to  
Camille Ruffino Youth Awareness Assistant**

**via US mail (155 S International Dr, Mooseheart, IL 60539)**

**Fax (630-859-6616) or Email ([cruffino@mooseintl.org](mailto:cruffino@mooseintl.org))**

**any way it must here by November 15<sup>th</sup> no exceptions**

**Chairmen Name:** \_\_\_\_\_ **St/Province:** \_\_\_\_\_

**Chairwomen Name:** \_\_\_\_\_

**Congress Date & Time:** \_\_\_\_\_

**Location of Congress:** \_\_\_\_\_ **Virtual:**    Y    N

**ATTENDANCE**

**Association Officers** \_\_\_\_\_ **Other Adults** \_\_\_\_\_ **Total Adults in Attendance** \_\_\_\_\_

**Total Number of Students in attendance:** \_\_\_\_\_

**List Speakers and affiliation:** (i.e. Moose, Law Enforcement, Educator, Counselor, Support Group etc. if applicable)

_____	_____
_____	_____
_____	_____
_____	_____

**Describe the Congress:** (Speakers, media, activities etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Evaluate the Congress:** (Strong and weak points, student response, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Association/Lodge Supported Youth Programs:** \_\_\_\_\_

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**List Lodge Name FRU # and number of students sponsored.  
Students must be sponsored by a Lodge.  
Please fill out all information completely**

<b>Lodge Name</b>	<b>FRU #</b>	<b># of Student Attendance</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

*(please copy if additional sheets are needed)*