



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

It is MANDATORY
this report 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)
any way it must be to me by December 15th no exceptions

LOOM Chairmen Name: _____ **St/Province:** _____

WOTM Chairwomen Name: _____

Congress Date & Time: _____

Location of Congress: _____

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: _____

**List Lodges and Chapters (including FRU #'s) and number of students sponsored.
Students must be sponsored by a Lodge or Chapter, not both.
Please fill out all information completely**

Lodge/Chapter Name	FRU #	# of Student Attendance
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)