

MICHIGAN DeMOLAY STATE OUTSTANDING RITUALIST QUESTIONNAIRE

CHAPTER NAME: _____ DATE SUBMITTED: _____

CHAPTER INSTALLATION DATE (MONTH / DAY / YEAR): _____

OUR CHAPTER OUTSTANDING RITUALIST IS:

NAME (First / Middle / Last): _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

DeMOLAY's BIRTHDATE (Month / Day/ Year): _____ Age (on August 13, 2018) _____

****Note: DeMolay member must not have reached his twenty-first (21st) birthday on or before August 13th, 2018 (the last day of Conclave 2018), to be eligible to compete for the State Outstanding Ritualist competition.**

Email: _____

CHAPTER OFFICES HELD (Past and Present): _____

STATE OFFICES HELD (Past and Present): _____

DeMOLAY HONORS AND AWARDS RECEIVED (Include Heartland Ritual Tournaments): _____

Will your Chapter Outstanding Ritualist compete in the State Outstanding Ritualist competition? (CHECK ONE) YES NO

PERSON TO CONTACT FOR ADDITIONAL INFORMATION:

CHAPTER ADVISORS NAME (PRINT): _____

CHAPTER 'ADVISORS NAME (SIGNATURE): _____

DATE SIGNED (Month / Day/ Year): _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

Email: _____

The "STATE OUTSTANDING RITUALIST QUESTIONNAIRE" form MUST be sent no later than APRIL 10th, following your Chapter Spring Term Installation, to...

DAD VINCE D'AGUANNO
EXECUTIVE OFFICER
MICHIGAN DeMOLAY
46581 STRATHMORE RD.
PLYMOUTH, MI 48170-3436

and

DAD DAVE FULMER
DIRECTOR OF ADMINISTRATION
MICHIGAN DeMOLAY
25125 STANFORD ST.
DEARBORN HEIGHTS, MI 48125-1621

Or By Email: daguannov@comcast.net

Or By Email: Grumpe128@aol.com

STATE OUTSTANDING RITUALIST QUESTIONNAIRE "MD FORM - 22 Revised: January 30, 2018"

PAGE 1 OF 1 PAGES