

Request for LWML Texas District Representative Visit

Name of Zone/Group _____

Type of Activity _____

Theme or Program Topic _____

Date of Event _____

Location of Event _____

Representative requested (check one)

- District President
- Vice President Christian Life
- Vice President of Communication
- Vice President Gospel Outreach
- Vice President Organizational Resources
- Mission Service Committee Chairman
- Pastoral Counselor
- District Young Woman Representative
- Convention Coordinator
- Other _____ (position)
- Any District Officer or Appointed Personnel Available

Signed by Zone/Group President _____

Address _____

Phone and Email _____

Date of Request _____

Email to: **LWML Texas District President**
president@lwmltxdist.org

(Travel, meals, and lodging expenses for district representative's visit are the responsibility of zone [see Standing Rule #5]).

Approval:

Your request has been approved and the following Executive Committee member will attend your zone/group event: _____

Signature of District President

Date