

# GRAND LODGE OF IOWA, A.F. and A.M.

## Visitation Information Form

In order to meet the mailing deadline of the Grand Master's Official Schedule, it is imperative that this form be completed and returned by no later than the first month preceding the month of the visitation; for example, forms for October visitations must be returned by no later than September 1. Please answer all applicable questions and return this form to the address shown below by the required deadline. Otherwise, this visitation will not be placed on the Grand Master's Official Schedule.

Requested date of visitation: \_\_\_\_\_

Lodge name and number: \_\_\_\_\_

Address of lodge: \_\_\_\_\_  
Street City

Type of Event (check all applicable):

- \_\_\_\_\_ General reception of Grand Lodge Officers  
\_\_\_\_\_ Reception in honor of a present Grand Lodge Officer  
\_\_\_\_\_ Cornerstone Laying Ceremony  
\_\_\_\_\_ Masonic hall Dedication Ceremony  
\_\_\_\_\_ Degree work. Which degree? \_\_\_\_\_ Will the Grand Lodge  
Officers be asked to participate in the degree work? \_\_\_\_\_  
If so, which section(s)? \_\_\_\_\_  
\_\_\_\_\_ Lodge anniversary. How many years? \_\_\_\_\_  
\_\_\_\_\_ Table Lodge  
\_\_\_\_\_ Fifty-Year Certificate presentation  
\_\_\_\_\_ Friendship Night  
\_\_\_\_\_ Other (Please specify) \_\_\_\_\_

Will any portions of your event be held at a place or places other than your lodge? \_\_\_\_\_ If so, please provide the following information:

Name of facility \_\_\_\_\_

Address \_\_\_\_\_  
Street City

Name of facility \_\_\_\_\_

Address \_\_\_\_\_  
Street City

Will your officers be wearing tuxedos?: \_\_\_\_\_

Will all the Grand Lodge Officers be invited to be guests of the lodge? \_\_\_\_\_ If so, the lodge should send invitations to each Grand Lodge Officer.

Will the Present and Past Grand Lodge Officers be officially received? \_\_\_\_\_

Are there plans for the ladies? \_\_\_\_\_ If so, please specify \_\_\_\_\_

Will a meal be served? \_\_\_\_\_

PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM

Please provide a time/activity/place schedule for this event. Use as many spaces as may be required.

EXAMPLES:

<u>Time</u>	<u>Activity</u>	<u>Place</u>
4:00 p.m.	Coffee hour	Community Center
5:00 p.m.	Reception of Present/Past Grand Lodge Officers	Lodge Hall
6:00 p.m.	Dinner and program	Community Center

OR

5:00 p.m.	1st Section of 3rd Degree	Lodge Hall
6:00 p.m.	Dinner	Lodge Hall
7:00 p.m.	Reception of Present/Past Grand Lodge Officers	Lodge Hall
7:30 p.m.	2nd Section of 3rd Degree	Lodge Hall

<u>Time</u>	<u>Activity</u>	<u>Place</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

How do you plan to publicize this event? \_\_\_\_\_

(The Public Relations Committee of the Grand Lodge can assist you in this endeavor. Please send requests to the committee in care of P.O. Box 279, Cedar Rapids, Iowa 52406.)

Please use the bottom portion of this sheet for any additional information you may wish to add.

Name of person completing this form: \_\_\_\_\_

Office: \_\_\_\_\_

Phone number in case additional information is needed: (\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Please return this form promptly to:

GRAND LODGE OF IOWA A.F. & F.M  
PO BOX 279  
CEDAR RAPIDS, IOWA 52406-0279