



# North Pacific Region #13 Date Clearance Request

Please answer as many questions as you can. This will help us determine any problems with overlapping events, as well as give us the information we need to put the event on the website.

Today's Date: \_\_\_\_\_

Your name: \_\_\_\_\_

Your phone number or email address: \_\_\_\_\_

Your chorus: \_\_\_\_\_

**Event** contact person: \_\_\_\_\_

Her phone number: \_\_\_\_\_

Her email address: \_\_\_\_\_

Type of event (please check one): Show: \_\_\_\_\_ Inter-chapter event: \_\_\_\_\_ Party: \_\_\_\_\_

Other (please specify): \_\_\_\_\_

Date(s) of event: \_\_\_\_\_

Time(s): \_\_\_\_\_

Event "name" or theme: \_\_\_\_\_

Event facility name: \_\_\_\_\_

Address: \_\_\_\_\_

Seating Capacity: \_\_\_\_\_

Will tickets be sold? \_\_\_\_\_ If yes, price(s): \_\_\_\_\_

Are you co-sponsoring this event with other chapters or organizations? \_\_\_\_\_

If yes, please list them here: \_\_\_\_\_

Please list any guest quartets or choruses whom you expect to perform: \_\_\_\_\_

Please feel free to add any comments, suggestions or questions you might have to the back of this form. *You will be notified of your date clearance 3-5 days after this request is received.*

**Please Return Completed Form To:**

Marshia Nicholson, Regional Calendar Coordinator  
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