

## **Request for Services**

From (requesting party/division/area/program/office):  Contact person:  Phone:  Email:  Fax:  Event or project:  Date and time of event:  Location:  Purpose of event or project:  ***********************************	
Phone: Email:  Fax:  Event or project:  Date and time of event:  Location:  Purpose of event or project:  ******************************	
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Please check all that apply:  □ Request for history and culture presentations □ Request for tools and weapons sta	
□ Request for Chickasaw education station       □ Request for language program station         □ Request for make-and-take activities       □ Request for Chickasaw history and Request for stickball demonstrations         □ Request for information         □ Request for pashofa station         Comments:	ation tion
Note: Form should be submitted at least four weeks in advance of date needed. Ple outline, summary or agenda for event if applicable. All requests are subject to availa ***********************************	bility.
Internal Use Only	
	Approved
Date returned:	Disapproved
Comments:	