



Senior Ms. Lumbee Appearance Request Form

Please fill out form completely. Incomplete forms will not be accepted.

Name of Event: _____

Date of Event: _____ / _____ / _____

Time of Event: _____

Location of Event: *(Please provide physical address for directions):* _____

Is there an admission fee? Yes No

If, yes how much? _____

Type of dress required:

Cultural Business Formal Casual

Will your event be serving alcoholic beverages? Yes No

Do you want her to: Perform Speak Attend *(Please list details below)*

Does your event require overnight stay? Yes No *If, yes please list details below:*

Will Host Event pay travel expenses? Yes No

If Host is paying expenses which ones are you covering? Hotel Per Diem Gas Other _____

Please provide the name, physical address and phone number of host hotel(s) and or event site: _____

PLEASE COMPLETE ENTIRE CONTACT INFORMATION SECTION

Contact Person: _____

Address: _____

Email Address *(This is how you will be notified)*: _____

Phone: (____) _____ **Fax:** (____) _____

Any other details that are important to know about the event that have not been listed above?

Name of person making request

Date

Senior Ms. Lumbee Coordinator

Date Approved/Denied

Please fax requests to Edward Strickland, Senior Ms. Lumbee Coordinator at 910-521-8660 or mail to the address below. You may contact Edward for additional information at 910-522-5462.

**LUMBEE TRIBE OF NORTH CAROLINA
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