

BOYS STATE ORIENTATION DATES

Return before November 15

Date _____ Time _____

Contact Person _____

Phone _____ Email _____

Orientation Location: _____
(Building Name)

(Street Address)

(City, State ZIP)

Date _____ Time _____

Contact Person _____

Phone _____ Email _____

Orientation Location: _____
(Building Name)

(Street Address)

(City, State ZIP)

Date _____ Time _____

Contact Person _____

Phone _____ Email _____

Orientation Location: _____
(Building Name)

(Street Address)

(City, State ZIP)

Note: Please report all Boys State Orientations to Department Headquarters. The Boys State Board of Directors requires a member of the Board of Directors be present at each Orientation.