



**Membership Enhancement Program  
Fun Activity Suggestion  
Transmittal Form**



Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Region: \_\_\_\_\_ District: \_\_\_\_\_ Chapter: \_\_\_\_\_



Category (check one)

*Please submit a separate form for each idea.*

Getting Acquainted \_\_\_ Awards \_\_\_ Games \_\_\_ Rides \_\_\_ Challenges \_\_\_

Activity Title: \_\_\_\_\_

Description of the Activity

Please return the completed form to:  
John & Barb Pons - Directors of Membership Enhancement  
mepgwrra@gmail.com