Print Form

(Date)

MEMORANDUM THRU

FOR Office of the Adjutant General, ATTN: SDMPO-FP, 2823West Main,Rapid City, SD57702-8186

SUBJECT: Request for Wellness Event

1. Type of wellness presentation:

2. Suggested Speaker(s) for presentation, address, and phone number if known:

3. Date/times of presentation:

4. Location of presentation:

5. Estimated number of spouses, parents, retirees: _____

   Estimated number of guard members: _____

   Other:_____ _____

   TOTAL NUMBER OF PEOPLE IN ATTENDANCE: _____

6. Will this presentation be in conjunction with other family activities?

   YES/NO If yes, explain

7. Name, address, and phone number of requester:

8. Unit of Family Support Group:

9. Commander Approval (signature block and signature below)

SDNG Form 600-12-10R (1 AUG 97)