



M.A.S.E

Mission Advancement through Special Events: Application

CONTACT INFORMATION	
Organization:	
Contact Name:	
Address/Line 1:	
Address/Line 2:	
City:	
State:	
Zip Code:	
E-mail:	
Fax:	
Daytime Phone:	
Cell Phone:	
Mission Statement for your Organization:	
 How did you hear about us?	

Proposed Event	
First Choice	
Day:	
Date:	
Time:	
Second Choice	
Day:	
Date:	
Time:	
Type of Event:	
Number of Guests:	
Space/Equipment Needed:	

Please Note:

- Submitting this application does not mean your event is confirmed.
- Submission may be made by mail, email, or fax to:

**Sahand Miraminy
Events Coordinator
PRESIDENT LINCOLN'S COTTAGE**

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