

LODGE NAME _____ STATE/PROV. _____ LODGE NO. _____

MOOSE FAMILY ACTIVITIES REPORT

Complete & mail to: Family Activities Report, Dept. of Fraternal Programs, 155 S. International Dr., Mooseheart, IL 60539-1126

PERIOD ENDING (Please check one below)

October 31, 20 _____

April 30, 20 _____

_____ **SCORE**

I LIST RECURRING ACTIVITIES DURING THE PREVIOUS 6 MONTHS THAT INVOLVED THE ENTIRE MOOSE FAMILY: Please indicate daily, weekly, monthly or annually.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

_____ **SCORE**

II LIST RECURRING ACTIVITIES DURING THE PREVIOUS 6 MONTHS THAT INVOLVED ADULTS ONLY: Please indicate daily, weekly, monthly or annually.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

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_____ SCORE

III LIST RECURRING ACTIVITIES DURING THE PREVIOUS 6 MONTHS THAT INVOLVED YOUTH ONLY : Please indicate daily, weekly, monthly or annually.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____

_____ SCORE

IV DOES YOUR LODGE HAVE A TEEN CLUB WITH BY-LAWS APPROVED BY THE GENERAL GOVERNOR? YES NO

_____ SCORE

V LIST HOLIDAY OR SEASONAL ACTIVITIES THAT ARE UNIQUE TO THE PREVIOUS 6 MONTHS:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

_____ SCORE

VI LIST "THEME" ACTIVITIES HELD DURING THE PREVIOUS 6 MONTHS: (I.E., 50'S NIGHT, LUAU, MASH PARTY, ETC.)

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

FAMILY ACTIVITIES
CHAIRMAN _____ **DATE** _____

GOVERNOR _____ **DATE** _____