

INCENTIVE POINTS REQUEST

1. Fill out this form on the computer.
2. Save the form and upload to tinyurl.com/ceasarisu

DATE OF APPLICATION: _____

ORGANIZATION: _____

INDEX CODE: CLB _____

CONTACT PERSON #1: _____

PHONE: _____

CONTACT PERSON #2: _____

PHONE: _____

PROVIDE INFORMATION ABOUT THE EVENT:

NAME OF EVENT: _____

DATE: _____

*CATEGORY: _____

LOCATION: _____

DESCRIPTION:

MEMBERS IN ATTENDANCE:

NAME (Print Legibly)	BENGAL ID	HOURS	NAME (Print Legibly)	BENGAL ID	HOURS

*See Incentive Points Requirements for Reference