



GWRRA University North Carolina Training Request Form



Fields with red border required

Name _____ Date _____

Phone _____ Chapter _____

Email _____ Chapter Position _____

Training Requested _____

First Choice Date _____ Alternate Date _____

Location _____

Additional Information (other chapters invited, etc.)

Please fill out and send to the North Carolina District University Coordinator

John Bryant
25 Midlavian Ct.
Franklinton, NC 27525
919-728-8447 (H)
817-455-0632(C)

or save as a file and email to: john.lena@msn.com