



INTERNATIONAL SOCIETY FOR KEY WOMEN EDUCATORS  
**DELTA KAPPA GAMMA**

**NYS Organization DKG (2019-2021)  
Area Council Visitation Request Form**

**Visitation Request:** *The Area Council Chair may request from the State President a visitation by one of the Pi State Officers or Related Personnel for their Area Conference. The Area Council shall provide meals and assist in arranging for her visit.*

Name of Person making the Request: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Area Council: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

State Representative Requested:

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

How would you like the State Representative to participate?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return form to: Sue Kenoyer, NYS Organization DKG President (2019-21)  
254 Allen Road  
Plattsburgh, NY 12901  
[suekenoyerdkg@gmail.com](mailto:suekenoyerdkg@gmail.com)