

Daily Calendar of Events

Local Event/Fundraiser

Event name: _____

Event sponsor: _____

Time, day and place: _____

Type of event: _____

Contact number to be printed with calendar notice _____

Additional pertinent information: _____

OR

Club meeting notice

Club name: _____

Date, time and place of meeting: _____

Contact number to be printed with calendar notice _____

Additional pertinent information: _____

Name & daytime phone number of person submitting information:

Please return to: Galion Inquirer, 366 Portland Way North, PO Box 648, Galion, Ohio 44833; Fax to: 419.468.7255; or E-mail requested information on the form to: wyoung@galioninquirer.com