



# Honor Guard Request for Other



Reason for Honor Guard request: \_\_\_\_\_

Council #: \_\_\_\_\_

Council Contact name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Date of event: mm/dd/yyyy: \_\_\_\_\_

Day or week (ie: Sun, Mon, Tue, Wed, Thu, Fri, Sat): \_\_\_\_\_

Time of event: (ie 10:00 am to 11:44 am) \_\_\_\_\_

Show time for Knights Honor Guard (ie: 1/2 hour prior to event (0930 am)): \_\_\_\_\_

Dressing Room Assigned for this event: \_\_\_\_\_

**If requesting an HG for a Mass:**

Name of Church: \_\_\_\_\_

Location of the Church (Name - Address): \_\_\_\_\_

Will the Knights of Columbus be asked to escort the Gifts: \_\_\_\_\_

**When this form is completed please scan/pdf the form and email to the person who gave you the form**

Person filling out this form: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**\*\* Email a copy of this to your Color Corps Commander for your Assembly.**

**\*\* Email a copy of this to your Faithful Navigator for your Assembly.**

**Comments:**