

CHICAGO WOLVES

MASCOT APPEARANCE REQUEST FORM

Date of event: _____ Time of event: _____

Name of event: _____

Contact person name: _____ Phone number: _____

Event location: _____

Address for event: _____

City: _____ State: _____ Zip Code: _____

TYPE OF EVENT:

- School Parade Party Charity
 Other: _____

Estimated number of people attending event: _____

Brief description of event and what you would like the mascot to be involved with: _____



- Appearance requests must be made 30 days prior to event date
- All requests are subject to availability
- Skates is not available during Wolves home games
- Appearance fees may apply

Contact Person (*print name*)

Send to:

Chicago Wolves Hockey Team
Skates Appearance Request
2301 Ravine Way
Glenview, IL. 60025
Phone: 1-800-THE-WOLVES
Fax: 847-724-1652

Please attach any maps or directions to this form when you mail it in.