



A.E.A.O.N.M.S, INC.

IMPERIAL YOUTH DEPARTMENT

TRAVEL DISTRIBUTION FORM

1. Temple/Court: _____ No.: _____
2. Oasis: _____ Desert: _____
3. Total Mileage One Way To Convention Site from Temple/Court Location: _____
4. Number Of Youth Participating: _____
5. Temple Director/Court Directress Name: _____
6. Type of Transportation: Train _____ Airplane _____ Bus _____ Van _____
7. Arrival Date and Time: _____

****Will you be using your bus/van for transportation to youth activities at the convention?**

YES: _____ **NO:** _____

8. RECORDER/RECORDRESS INFORMATION:

NAME: _____ **PHONE NO.** _____

EMAIL ADDRESS: _____

TEMPLE/COURT MAILING ADDRESS, CITY, STATE, ZIP: _____

DEADLINE: FEBRUARY 1, 2026

MAIL TO: HPIC Lorraine James
Youth Dept Director
PO Box 6424
Tallahassee, FL 32314

Note: To ensure receipt, forms can be emailed to: youthdirector@aeonms.org