

Jackson Generals

Mascot and Player Appearance Request Form

Contact Name: _____

Phone: _____

Address: _____

Date Requested: _____

Organization Name: _____

Please Check Who You Want Attending Event:

Sarge: _____ Player: _____

Event: _____

Event Date: _____

Description of Event: _____

Other Notes: _____

*All requests will be evaluated by a Jackson Generals representative. Not all requests will be accepted due to player's schedule/travel. Player appearances must be completed by noon.