Department of Defense, Veterans and Emergency Management
Maine National Guard Counterdrug Task Force
Drug Demand Reduction Program

MISSION REQUEST FORM

The Maine National Guard is committed to supporting Maine citizens as they help our young people develop the resiliency they need to lead healthy, drug free lives. Please answer the following questions to help the Maine National Guard better serve your organization.

Requesting Organization: _____
Contact Person: _____
Mailing Address: _____
Phone Number: _____
E-mail Address: _____
Dates Requested: _____
Alternate Dates: _____
Start/End Time: _____
Location of Event: _____
Number of Participants: _____
Grade Level/Ages: _____

What is your organization doing for substance abuse prevention with this audience?
Has the Maine National Guard presented a program to your organization in the past? (If yes, when and where?)
What issues/concerns would you like our facilitators to address during this session?
What special issues/considerations might your group have? (handicapped, hearing impaired, etc.)

Events Requested: (*check all that apply*)

- ☐ Stay on Track
- ☐ Just Chillin' Book Club
- ☐ Rappel Tower
- ☐ ROPES Course
- ☐ Portable ROPES Course
- ☐ Special Request
- ☐ "Falling" 8th Grade Program

Please forward this form to:
Drug Demand Reduction Program
CDTF Camp Keyes
State House Station #33
Augusta, ME 04333-0033
Phone: (207)430-5254
Fax: (207)430-5538
E-mail: ddr@me.ngb.army.mil
http://www.me.ngb.army.mil/ddr/

Signature: _____ Date: _____

FEB 2011

Mission Number: _____
Lead Facilitator: _____