



Request for Recognition of Religious Group

Facility: _____

Staff Contact: _____

Name of Religious Group: _____

Tenets of the religion: _____

How often does the Group want to meet?: _____

Dietary requirements (Attach source documents): _____

Holidays (Attach source documents): _____

Property Requirements (Attach source documents): _____

Approximate number of offenders in the Group: _____

Other facts bearing on this matter: _____
