



1 NAME OF LOCAL ORGANIZATION: _____
 NAME OF STATE ORGANIZATION: _____
 CONVENTION CITY: _____ STATE ____ DATE _____ 20 ____

3	TOTAL ►			
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4 Address: _____ City: _____ State: _____ Zip: _____

On Site Registration: Cash or Money Order Only – NO CHECKS

Date Received _____ Total \$ _____
 Method of Payment: Cash _____ Credit Card _____ ☐ Visa ☐ MasterCard
 Check Personal # _____ Association Check # _____ Money Order # _____
 Receipt # _____