

CREDENTIALS COMMITTEE

Badge: _____

Ref. No: _____

PRE-REGISTRATION FORM - GRAND CHAPTER OF FLORIDA

PRE-REGISTRATION FEE IS \$25.00 PER MEMBER ATTENDING (Non-Refundable)
SEND PRE-REGISTRATION FORMS WITH CHECK OR MONEY ORDER PAYABLE TO
“THE GRAND CHAPTER OF FLORIDA, O.E.S.” One check can cover multiple registrations.
MAIL TO: James E. Lambert, PGP, 565 Joy Haven Drive, Sebastian, FL 32958
IMPORTANT: To receive the pre-registration discount, all Pre-Registration mailing envelopes
MUST BE POSTMARKED no later than May 15, 2020 (NO EXCEPTIONS)
ANY CHECKS RETURNED FOR INSUFFICIENT FUNDS, CREDENTIALS WILL NOT BE ISSUED UNTIL ALL
BANK FEES and REGISTRATION FEES ARE PAID. LOSS OF DISCOUNT WILL BE APPLIED.
REGISTRATION FEE (WALK-IN) AT THE SESSION WILL BE \$30.00

115th ANNUAL GRAND CHAPTER SESSION - JUNE 16-18, 2020

ONE NAME PER FORM - PLEASE PRINT OR TYPE ALL INFORMATION

Member of (primary) Chapter: _____ Chapter # _____ District # _____ State _____

Plural/Dual Member of: _____ Chapter # _____ District _____

Name: _____ Telephone No. _____

Home Address: _____
Street City State Zip

Your Title as of the **START** of this Grand Chapter Session

General Grand Chapter Title: _____

Grand Chapter Title: _____

Grand Representative of _____ in _____

Are you a Florida Past Matron/ Past Patron? YES NO

VOTING DELEGATES

If you are a Member with voting credentials, which Florida Chapter are you representing?

Chapter Name: _____ Chapter # _____ District # _____

Voting Certificates: WM W P AM AP (Check all that apply)

As a registered member of the Order of the Eastern Star, I will be participating at my own freewill and risk in the activities of the 115th Annual Session of the Grand Chapter of Florida, Order of the Eastern Star. I understand and agree that the Grand Chapter of Florida, Order of the Eastern Star, Inc. is not responsible for any injuries (known or unknown) or property damage that I may sustain while traveling to/from, while at, or while otherwise participating in, the 115th Annual Session of the Grand Chapter of Florida, Order of the Eastern Star.

Signature _____ Date signed: _____

THIS FORM IS FOR ALL MEMBERS OF FLORIDA AND ALL OTHER GRAND JURISDICTIONS AND MAY BE DUPLICATED AS NEEDED