

GRAND CHAPTER PRE-REGISTRATION

Dear Chapter Secretaries:

Please provide your completed form, along with **ONE** check made payable to “**MN Grand Chapter, OES**” and mail by Friday, April 21, 2017 to:

**Marcia Evans
8146 Hyde Avenue So.
Cottage Grove, MN 55016**

The following members of _____, No. _____,
(Chapter Name)
located in _____ will be attending
(City)
Minnesota’s 2017 Grand Chapter “Stronger Together” Session:

Please PRINT or TYPE names – thank you.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Please list any additional names on the back of this form or by attaching an additional sheet.

Please note there will be NO REFUND of registration fees. Thank you.

Total # of members attending _____ x \$25 Total Amount enclosed \$ _____
(Check payable to “MN Grand Chapter, OES”)

Chapter Secretary: _____ Phone: _____
(name)