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: Mrs. Bette McMillan, P.O. Box 9587, Port St. Lucie, FL 34985

IMPORTANT: To receive the pre-registration discount, all Pre-Registration mailing envelopes

MUST BE POSTMARKED no later than March 14, 2025 (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.

119th ANNUAL GRAND CHAPTER SESSION - April 8 - 10, 2025

REGISTRATION FEE (WALK-IN) AT THE SESSION WILL BE \$30.00

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 Sess	<u>ion</u>			
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	a Chapter are you repre	senting?		
Chapter Name: Chapter #	District #			
Voting Certificates: WM W P AM AP_	Check all that appl	y)		
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 119th 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 119th Annual Session of the Grand Chapter of Florida, Order of the Eastern Star.				
Signaturel	Date signed:			

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