



60TH ANNUAL WESTERN REGION MEETING REGISTRATION FORM

JULY 9-10, 2019

Registration Must
Be completed by
June 19th

ATTENDEE INFORMATION	REGISTRATION \$20/PERSON (REQUIRED FOR ALL)	SERVICE PROJECT NO COST (HEAD COUNT)	TUESDAY EVENING MEMBER OR SENIOR EVENT \$15/PERSON	WEDNESDAY TOUR/BUS/BOX LUNCH PACKAGE \$40/PERSON	WEDNESDAY EVENING BANQUET Ages 10 & under \$20 Ages 11+ \$55	PATRON DONATION	TOTAL
Name:							
Address:							
City/State/Zip:							
Phone:							
Email:							
Age (if under 22):							
Highest Office:							
Name:							
Address:							
City/State/Zip:							
Phone:							
Email:							
Age (if under 22):							
Highest Office:							
Name:							
Address:							
City/State/Zip:							
Phone:							
Email:							
Age (if under 22):							
Highest Office:							
Name:							
Address:							
City/State/Zip:							
Phone:							
Email:							
Age (if under 22):							
Highest Office:							

Make your check payable to Western Region C.A.R. and mail by **June 19th, 2019** to: Western Region Senior Registrar, Sandra Coultrap 1685 E Club Lane, Hayden, ID 83835

Grand Total _____

With questions please contact Mrs. Steiner at sjakccsa@hotmail.com or 907-306-6190.