Registration Form

WINTER HARMONY WEEKEND

FEB. 3-5, 2017

THE LODGE AT SAWMILL CREEK RESORT

400 SAWMILL CREEK, HURON, OH 44839

REGISTRATION DEADLINE –January 20, 2017

Weekend Facilitator – Diane Porsch

Email completed forms (if using CC) or mail along with chapter check made payable to

“GREAT LAKES HARMONY Region #17" to

If sending via mail: Sue Heck If sending via email: Cathy Dunlap

5229 Dungannon Cr NW **PREFERRED** cdunlap1969@gmail.com

North Canton, OH 44720 330-936-4061

Ph: 330-324-2391

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Total number of NON-MEMBERS  and Members at Large | | |  | $10.00 ea. | | $ | | (enclosed) |
| Total number of MEMBERS (includes male non-member directors) | | |  | No Charge | | $ | | (enclosed) |
| No fee for non-member attending spouses  Total Perspective Members | | | \_\_\_\_\_\_\_\_\_\_\_ | No Charge | |  | |  |
| **(Note: Members at Large do not have an Assesment on their dues. Therefore the $10 Reg. fee)** | | |  |  | |  | |  |
| CHORUS NAME |  | | | | | | | |
| CONTACT Name | |  | | | | | | |
| CONTACT Address | |  | | | | | | |
| CONTACT Email | |  | | | Phone | |  | |

\_\_\_\_Check Enclosed \_\_\_\_Credit Card Payment (Visa / MC)

Name on Credit Card\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp. Date\_\_\_\_\_\_\_\_\_ code on back \_\_\_\_\_\_

(3 digit)

Address for Credit Cardholder (if different than above)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REGISTRATIONS ARE NON-REFUNDABLE. THEY ARE TRANSFERABLE.

REGISTRATION FORM – HW Weekend Sawmill Creek, Feb. 3-5, 2017

* Please place names as you wish them to read on your nametag which will be available to pick up upon registration. Please indicate New and Perspective Members

Pre-registration is being made for the following members of

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CHAPTER NAME: | | | | | |
| FIRST NAME LAST NAME FIRST NAME LAST NAME | | | | | |
| 1. |  |  | 31. |  |  |
| 2. |  |  | 32. |  |  |
| 3. |  |  | 33. |  |  |
| 4. |  |  | 34. |  |  |
| 5. |  |  | 35. |  |  |
| 6. |  |  | 36. |  |  |
| 7. |  |  | 37. |  |  |
| 8. |  |  | 38. |  |  |
| 9. |  |  | 39. |  |  |
| 10. |  |  | 40. |  |  |
| 11. |  |  | 41. |  |  |
| 12. |  |  | 42. |  |  |
| 13. |  |  | 43. |  |  |
| 14. |  |  | 44. |  |  |
| 15. |  |  | 45. |  |  |
| 16. |  |  | 46. |  |  |
| 17. |  |  | 47. |  |  |
| 18. |  |  | 48. |  |  |
| 19. |  |  | 49. |  |  |
| 20. |  |  | 50. |  |  |
| 21. |  |  | 51. |  |  |
| 22. |  |  | 52. |  |  |
| 23. |  |  | 53. |  |  |
| 24. |  |  | 54. |  |  |
| 25. |  |  | 55. |  |  |
| 26. |  |  | 56. |  |  |
| 27. |  |  | 57. |  |  |
| 28. |  |  | 58. |  |  |
| 29. |  |  | 59. |  |  |
| 30. |  |  | 60. |  |  |

NOTE: THE NAMETAGS ARE GENERATED FROM THIS LIST. PLEASE MAKE SURE THE SPELLING OF NAMES IS CORRECT. PLEASE TYPE NAMES IF AT ALL POSSIBLE. THIS IS A FILLABLE FORM

This form may be duplicated if necessary.

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Registrations after Jan. 20th will be assessed a $5.00 late fee.