

CFWC CALIFORNIA FEDERATION OF WOMEN'S CLUBS
 120th Annual Convention
 Credential **AND** Meal Reservation Form
DEADLINE: April 26

Please return this form with check payable to CFWC Convention Fund. (Make a copy for your records).
 Registration and Meal Reservations must be received by: **April 26**
 Mail check and form to: Kathi McGraw, 4584 Sherington Ct., Cypress 90630 glenn.mcgraw@ca.rr.com

PLEASE TYPE or PRINT CLEARLY

NAME _____ AREA _____

DISTRICT NAME _____ CLUB NAME _____

YOUR ADDRESS _____ CITY _____ ZIP _____

EMAIL: _____

SIGNATURE _____ PHONE _____

CREDENTIAL

- Position – Indicate which you represent
- R-1 _____ CFWC Officer
 - R-1A _____ CFWC Chairman
 - R-1B _____ CFWC Committee Member
 - R-1C _____ Past CFWC President

REGISTRATION FEES:

- CFWC Member \$20.00 _____
- Late Registration \$30.00 _____
- Guest - 0 - _____

MEALS

PREFERENCE*

		<u>Thursday – May 18</u>	R	V	
R-2a _____ District President		M-1 Emeritus Lunch	___	___	\$45.00 _____
R-2b _____ District 1 st Vice President		M2 Banquet	___	___	\$68.00 _____
		<u>Friday – May 19</u>			
R-3a _____ Club President		M-3 ESO	___	___	\$38.00 _____
R-3b _____ Club Delegate		M-4 Lunch	___	___	\$45.00 _____
R-4 _____ Member (non-voting)		M-5 Banquet	___	___	\$68.00 _____
		<u>Saturday – May 20</u>			
R-5 _____ Juniette		M-5 Luncheon	___	___	\$45.00 _____
R-6 _____ Guest					

TOTALS

If you are bringing a guest for meal function, please send Registration forms together and note guest name

Registration \$ _____
 Meals \$ _____

**PLEASE INDICATE IF YOU USE A MOTOR
 POWERED SCOOTER/CHAIR** _____

TOTAL ENCLOSED _____
 (Includes Registration & Meals)

Check Number/Date _____ / _____

**EACH ATTENDEE
 MUST
 SUBMIT INDIVIDUAL
 REGISTRATION FORM**

***Mark R for regular meal
 Or
 V for Vegetarian**

SPECIAL DIETARY REQUESTS MUST BE NOTED ! _____