NON-VOTING MEMBER REGISTRATION FORM

Complete a separate form for each person attending. Type or print neatly. Form may be duplicated as needed. Keep a copy for your records.

COURT NUMBER __________ STATE __________

NAME (LAST) ___________________ (FIRST)____________________

ADDRESS ______________________ PHONE (____) ______________

CITY __________________________ STATE _____________ ZIP __________

E-MAIL must be provided for confirmation that registration was received.

Authorization from Local Court for Non-Voting Member

We hereby confirm that ________________________________ is an active member in good standing of Court _______________________________ # ____________________.

Regent’s Signature ______________________ and Financial Secretary’s Signature ______________________

Non-Voting Members are permitted into the convention room, but may not vote or sit in the Delegate’s section.

Please print your First name as you want it to appear on your name badge. ____________________________________________

Please print your CDA National, State or Local Court Office title. ____________________________________________________

☐ Check here if this is your first National Convention.

PAYMENTS (Write the amount to be paid in the blank at the left.)

_________ $130.00 Non-Refundable EARLY BIRD NON-VOTING member Registration Fee (postmarked on or before June 1, 2020.)

_________ $160.00 Non-Refundable NON-VOTING Registration Fee (postmarked June 2 or later)

_________ $ 75.00 per day Non-refundable DAILY non-voting Registration Fee ($75.00 X Number of Days)

Please mark days attending: ☐ Wednesday ☐ Thursday ☐ Friday

$ ______ TOTAL AMOUNT ENCLOSED

Send Registration form(s) along with Court Check payable to: Catholic Daughters of the Americas

10 West 71st Street

New York, NY 10023

Early registration deadline postmarked June 1. Registration fees are not refundable under any circumstances. One check may be sent or the total registration fee for all delegates, alternates and members from the same court, if all registration forms are sent together with check.

National Office use only: Check # ___________ Dated ___________ Amount $ ______________________
