



South Carolina York Rite Convention

Registration Form

(One person per form)

Name _____

Address _____ City _____ State _____ Zip _____

Contact Phone Number _____ Email Address _____

(Registration Fee includes meeting fee, luncheon, and banquet.)

ON-SITE REGISTRATION

ONE MEETING: \$200.00

TWO MEETINGS: \$250.00

THREE MEETINGS: \$300.00

Meeting:	
R&S	_____ Thursday
LOCOP	_____ Thursday
HRAM	_____ Friday
HOJ	_____ Friday
KT	_____ Saturday
GUILD	_____ Saturday

Additional Tickets:	
Luncheon Thursday	_____ \$40.00
Luncheon Friday	_____ \$40.00
Luncheon Saturday	_____ \$40.00
Banquet Friday	_____ \$50.00

Total: \$ _____

MAKE ALL CHECKS OR MONEY ORDERS PAYABLE TO: **YORK RITE CONVENTION**

MAIL ALL FUNDS AND FORMS TO:

**York Rite Convention Registration
P. O. Box 290816
Columbia, SC 29229**

Emergency Contact Information: Name _____

Phone _____