

September Conference Registration Form

Enclose ONE (1) Club Check for \$ 15.00 per person

Payable to: De Anza District
Deadline: September 9, 2019

Mail to: Carolyn Follis
 25650 Union Hill
 Menifee, CA 92586

Phone: 760 415-2513
Email: Carolynfollis@gmail.com

Club Name/Contact: _____

Attending: _____ Check #: _____ Amount Enclosed: _____

Please ✓ if Past District or State President(s)

Please ✓
 Vegetarian
 and/or
 Food

	Name of Attendee	Club Position	De Anza District Position	State CFWC Position	✓ V	✓ A
1			<input type="checkbox"/>	<input type="checkbox"/>		
2			<input type="checkbox"/>	<input type="checkbox"/>		
3			<input type="checkbox"/>	<input type="checkbox"/>		
4			<input type="checkbox"/>	<input type="checkbox"/>		
5			<input type="checkbox"/>	<input type="checkbox"/>		
6			<input type="checkbox"/>	<input type="checkbox"/>		
7			<input type="checkbox"/>	<input type="checkbox"/>		
8			<input type="checkbox"/>	<input type="checkbox"/>		
9			<input type="checkbox"/>	<input type="checkbox"/>		
10			<input type="checkbox"/>	<input type="checkbox"/>		