

**REGISTRATION FORM**

**District 14 Annual General Meeting**

**Hosted by Fort Frances Horticultural Society**

**May 31st and June 1st , 2019**

**Sister Kennedy Centre**

**401 Nelson Street, Fort Frances, Ontario**

(Print please)

Name of Society:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Delegates \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_

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

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

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

Society Fee …………………………………………..$40.00

Total number of delegates’ \_\_\_\_\_\_ X $40 \_\_\_\_\_\_\_\_

                                                           TOTAL $

(Cheque payable to the Fort Frances Horticultural Society)

Dietary restrictions/allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE:** Please **confirm** your attendance by email to Judy Koski (judykoski@yahoo.ca) **prior to May 4th**.

**Please mail your Society cheque for the Society fee and for the number of delegates attending by May 4th.**