

**2019 ANNUAL CONVENTION REGISTRATION FORM**

20-23 JUNE 2019

Safety Harbor Resort & SPA

NAME	Rank	ADDRESS
Phone #	Service	Email Address
Name of Guest	Chapter	

**Resort Reservation Cost** Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

\$ \_\_\_\_\_ = # Nights X \$109.00 **Bed preference:** \_\_King \_\_2 Queen

**Please indicate the number registering, shirts, and attending each event below**

# Cost  
\_\_ X \$30.00 = \_\_\_\_\_ **Registration:** \$30.00 Each Attendee

\_\_ X \$30.00 = \_\_\_\_\_ **Presidents Reception:** \$30.00 Each Attendee

\_\_ X \$30.00 = \_\_\_\_\_ **Breakfast :** \$30.00 Each Attendee

\_\_ X \$30.00 = \_\_\_\_\_ **Luncheon:** \$30.00 Each Attendee

\_\_ # **Attending Military Ball**

**Meal choices for Military Ball**

\_\_ X \$50.00 = \_\_\_\_\_ \$50.00 each London Broil

\_\_ X \$50.00 = \_\_\_\_\_ \$50.00 each Chicken Marsala

\_\_ X \$55.00 = \_\_\_\_\_ \$55.00 each Grilled Salmon

**Shirts**

\_\_ X \$35.00 = \_\_\_\_\_ Man: \_\_ Small \_\_ Med \_\_ Large \_\_ XLarge \_\_XXLarge

\_\_ X \$35.00 = \_\_\_\_\_ Woman: \_\_ Small \_\_ Med \_\_ Large \_\_ XLarge \_\_XXLarge

\_\_\_\_\_ **TOTAL COST (Check Payable to: Florida Council of Chapters)**

\_\_ Will Attend \_\_ Will Not Attend **20 June Operation Helping Hand Dinner**

(No charge for meal. Transportation provided by James A Haley Veterans Hospital from Safety Harbor Spa and Resort for first 50 that sign up.)

\_\_ **Will** \_\_ **Will not need transportation from Spa**

**Mail Form and Check to:** Lewis VanDyke  
1151 Shipwatch Circle  
Tampa, FL 33602-5786

**NOTE:** Send questions or special accommodation needs to: [vandykeRL@verizon.net](mailto:vandykeRL@verizon.net)  
Provide any comments you may have on the back of this form.