

accessing this form from FLSSAR Website, SAVE this form to your computer; then OPEN Adobe Reader and open the form, fill it out, and SAVE. Verify that the form has filled out. Then open an e-mail message, ATTACH this file to the message and send to mp18pht@verizon.net. If this form DOESN'T fill out, use this version of the form http://www.flssar.org/Docs/11FallBOM-RegForm-nonweb.pdf - print it out fill it in and mail to address listed.

Name		Chapter		
Phone	Guest <u>NAME</u> :			
Emergency Contact (Name/Phone)			Current Date	
For Registration confirmation and update not	ifications - email			
I prefer to use MY OWN name tag for the BOM I Require a hard copy Of BOM Proceedings - "Blue Book"				
BOM Voting Authority (Article II, Section I, FLSSA	R Bylaws: Select only	ONE	A member of the BOM who is unable may name, in writing, another memb attend and act in his stead; provided	per of the FLSSAR to , however, that no
I Plan on attending the following BOM Sessions (select as many as you want)				
Se	ecretary Session	Finance Session		
The meals (below) include: Beverage, Salad, Rolls and Dessert choice.				
Select a dessert choice from the 2 options. If left	blank, you will receive	the cake. Guest will atte	nd Ladies Breakfast	
October 21 st - Member	Meal Choice	Member Dessert	Amount	
Friday Banquet Guest Me	al Choice	Guest Dessert	Amount	
MEAL RESERVATIONS MUST BE RECEIVED ON OR E October 15, 2011 Meal changes/cancellations must be p 72 hours prior to BOM.	Deviaturation Fee	- SAR Members Only - \$10	Total	

If you register for meals and fail to show, you will owe for the meals

If you mail your registration via USPS and do NOT receive a confirmation via e-mail (you must list an e-mail address) within 4 days of mailing, call 941-497-2704. If you register by e-mail and do NOT receive a confirmation via e-mail within 1 day of sending message, call 941-497-2704.

FLSSAR Meetings Arrangements Committee % Phillip H. Tarpley 4303 Via Del Villetti, Venice FL 34293-7061