

GEORGIA OES GRAND CHAPTER REGISTRATION FORM
Georgia Members and Distinguished Guests of Other Grand Jurisdictions
"Come Fly With Us" Session, June 13-16, 2024

| | |
|----------|-------|
| Reg. No. | _____ |
| Ck. No. | _____ |
| Initial | _____ |

NAME (Print or Type): _____

PRIMARY CHAPTER: _____ **NO:** _____ **DISTRICT:** _____

PLURAL CHAPTERS: _____ **NO:** _____ **DISTRICT:** _____

I will pick up Registration Packet on _____ **Thursday 6/13** _____ **Friday 6/14** _____ **Saturday 6/15**

| GEORGIA OES MEMBERS PLEASE FILL OUT THE FOLLOWING | | |
|--|--|--|
| TITLES YOU HOLD | | |
| <input type="checkbox"/> (A) Worthy Grand Matron | <input type="checkbox"/> (F) Appointed Grand Officer | <input type="checkbox"/> (U) Session Appointee |
| <input type="checkbox"/> (B) Worthy Grand Patron | <input type="checkbox"/> (G) Grand Representative | <input type="checkbox"/> (V) Past Most Worthy Grand Matron |
| <input type="checkbox"/> (C) Past Grand Matron | <input type="checkbox"/> (P) Special Appointment of MWGM | <input type="checkbox"/> (Z) GGCCM |
| <input type="checkbox"/> (D) Past Grand Patron | <input type="checkbox"/> (S) Elected Grand Trustee | <input type="checkbox"/> Other: |
| <input type="checkbox"/> (E) Elected Grand Officer | <input type="checkbox"/> (T) District Grand Deputy | |

The Following to Be Filled Out by Distinguished Guests of Other Grand Jurisdictions:

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

GRAND JURISDICTION: _____ **WHAT IS YOUR TITLE?** _____

| DISTINGUISHED GUESTS OF OTHER GRAND JURISDICTIONS, PLEASE FILL OUT THE FOLLOWING | | |
|--|---|---|
| <input type="checkbox"/> (A) Worthy Grand Matron | <input type="checkbox"/> (V) Past Most Worthy Grand Matron | <input type="checkbox"/> (I) Most Worthy Grand Matron |
| <input type="checkbox"/> (B) Worthy Grand Patron | <input type="checkbox"/> (W) Past Most Worthy Grand Patron | <input type="checkbox"/> (O) Most Worthy Grand Patron |
| <input type="checkbox"/> (C) Past Grand Matron | <input type="checkbox"/> (X) Elected General Grand Chapter Officer | <input type="checkbox"/> (S) Elected Grand Trustee |
| <input type="checkbox"/> (D) Past Grand Patron | <input type="checkbox"/> (Y) Appointed General Grand Chapter Officer | <input type="checkbox"/> (T) District Grand Deputy |
| <input type="checkbox"/> (E) Elected Grand Officer | <input type="checkbox"/> (Q) Grand Representative of other Grand Jurisdiction | <input type="checkbox"/> Other: |
| <input type="checkbox"/> (F) Appointed Grand Officer | <input type="checkbox"/> (Z) General Grand Chapter Committee Member | |

Please complete this registration form and return it with your check or money order for \$17.00 made payable to the **Grand Chapter of Georgia**. **Mail the Registration Fee and This Form** to Dan Sims, 215 Gilchrist Drive, Warner Robins, GA 31093. The deadline for pre-registration is June 1, 2024. **NO REFUNDS**. If you register at Grand Chapter, the fee is \$20.00. Your canceled check will serve as your receipt.

Your registration is an acceptance of the following disclaimer.

As a member of the Order of the Eastern Star I will be participating of my own freewill and at my own risk in the activities of the "Come Fly With Us" Session of the Grand Chapter of Georgia, Order of the Eastern Star. I understand and agree that the Grand Chapter of Georgia is not responsible for any injuries (known or unknown), sickness or property damage that I may sustain while traveling to/from, while at, or otherwise participating in the activities of the "Come Fly With Us" Session of the Grand Chapter of Georgia.