



District 27-A1 Convention Registration

April 10, 2021 ~ Oak Creek Community Center, 8580 South Howell Ave., Oak Creek, WI

Club Name: _____

Contact Name: _____

Contact Email: _____

ONLINE REGISTRATION IS AVAILABLE www.wilions.org/convention

Attendee (Print First Name and Last Name)	Select One	Club/District Officer Status - SELECT ONE	
1 _____	<input type="checkbox"/> Delegate <input type="checkbox"/> Alternate <input type="checkbox"/> N/A	<input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer	<input type="checkbox"/> Past District Governor <input type="checkbox"/> Other - Specify: _____ <input type="checkbox"/> N/A
2 _____	<input type="checkbox"/> Delegate <input type="checkbox"/> Alternate <input type="checkbox"/> N/A	<input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer	<input type="checkbox"/> Past District Governor <input type="checkbox"/> Other - Specify: _____ <input type="checkbox"/> N/A
3 _____	<input type="checkbox"/> Delegate <input type="checkbox"/> Alternate <input type="checkbox"/> N/A	<input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer	<input type="checkbox"/> Past District Governor <input type="checkbox"/> Other - Specify: _____ <input type="checkbox"/> N/A
4 _____	<input type="checkbox"/> Delegate <input type="checkbox"/> Alternate <input type="checkbox"/> N/A	<input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer	<input type="checkbox"/> Past District Governor <input type="checkbox"/> Other - Specify: _____ <input type="checkbox"/> N/A
5 _____	<input type="checkbox"/> Delegate <input type="checkbox"/> Alternate <input type="checkbox"/> N/A	<input type="checkbox"/> President <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer	<input type="checkbox"/> Past District Governor <input type="checkbox"/> Other - Specify: _____ <input type="checkbox"/> N/A

REGISTRATION FEE IS \$25 PER PERSON / Total # Registered: _____ x \$25 ea. = \$ _____

Mail Registration and Check payment to: CONVENTION REGISTRATION,
 C/O LION ANGELA MITCHELL
 N3946 COUNTY ROAD K, JEFFERSON 53549

For questions about **registration**:
 email: register@wilions.org
 phone: 262-672-5786

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***Convention Service Project: Non-perishable Food Donation
 Interested in a free raffle ticket? Each person that brings a non-perishable food donation will receive 1 free raffle ticket.