## REGISTRATION Mail-in/Email FORM for the REGION 5 ASSEMBLY March 16-18, 2018, in Chesterton, IN

Name:	Fill in the appropriate fees: See <sup>o</sup> below.	
Name to be on name tag/roster:	Rep Registration after 2/16/18	\$45
		\$43 <u> </u>
Address/City/State or Province/Postal Code:	Rep Registration by 2/16/18	
	Lunch for a Visitor	\$25 \$20
	Region 5 Handbook	φz0
	The following is delivered at the assembly	
Phone:	Copy Packets A & B	\$20
Cell or Landline?	Copy of Agenda/Timeline	\$0.40
Email:	Copy of Bylaws	\$0.80
	Copy of Policies & Procedures	\$1.40
Intergroup:	Copy of Convention Guidelines	\$0.80
How many Region 5 assemblies have you previously attended?	Copy of Standing Rules	\$0.20
none1 to 3 more than 3	Other Documents (10¢/page)	
Indicate your role <u>at this assembly</u> : See * below. Representative	(Specify what documents) see below.	
Alternate Representative		
Visitor Officer/Trustee		
If you are registering as a <u>representative</u> (of any type), is this the first assembly at which you have been a <i>Region 5 representative</i> ? YesNo	Paid for by	
	(If payment is not enclosed)	
	Payment is included for the following people: (Indicate amount paid for each person.)	
Indicate your first 2 choices for committee		
assignment: See * below.		
<ul> <li>Bylaws</li> <li>Convention (IGs hosting convention only)</li> <li>Finance</li> <li>Media</li> <li>If you are <u>currently chairing</u> a Region 5</li> <li>business committee, which committee do you chair?</li> </ul>	Representative Register must be received by March 9, 2018.	
	Registration forms may either be emailed to:	
	secretary@region5oa.org	
If you are looking for a roommate, indicate: Male Female	or mailed to:	
	Region 5 Secretary	
Visitor: indicate all services you are available to perform if needed: Copy Cordinator Timer Election Teller	108 Fullers Cir	
	Pickerington OH 43147	
	Registration checks (payable to Region 5) should be mailed to the above address.	