



126th Convention Committee
Registration Form
PLEASE PRINT

Name: \_\_\_\_\_

Member Number \_\_\_\_\_ Council Number: \_\_\_\_\_ District Number \_\_\_\_\_

Mark all that apply:

- ( ) Delegate ( ) Voting Alternate Delegate ( ) Alternate Delegate ( ) Guest
( ) Clergy ( ) Past State Deputy ( ) Former State Officer ( ) District Deputy
( ) Former District Deputy ( ) Grand Knight ( ) Past Grand Knight ( ) Faithful Navigator
( ) Past Faithful Navigator ( ) Master ( ) Former Master ( ) General Agent or Field Agent

Spouse/Guest Attending: Y / N (Circle) Spouse/Guest Name \_\_\_\_\_

Nights Staying at Crown Plaza Thursday Friday Saturday (Circle All That Apply)

Member Contact Information

Address: \_\_\_\_\_
(Street, Apt #)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Cell phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

( ) My Lady will be attending the Ladies' Social on Saturday.
(Included with Registration and Meal Plan.)

Registration - (Men or Women) Prior to April 1, 2024: \$40.00 / After April 1, 2024: \$45.00

Meal Plan - \$250 per person includes Friday Dinner, Saturday Breakfast, Saturday Lunch, Saturday Banquet, Sunday Breakfast. Note special requirements in the back of the form.

Registration prior to April 1, 2024, at \$40 each \$\_\_\_\_\_
Registration after April 1, 2024, at \$45 each \$\_\_\_\_\_
Meal Plans at \$250 each \$\_\_\_\_\_
Total Due: \$\_\_\_\_\_

Please make checks payable to: "KofC 2024 CONVENTION COMMITTEE". Please mail completed form and check to:

Michael Yuknek, Registration Chairman, 5157 Westley Drive, Clifton Heights, PA 19018

Committee Use Only

Date Received: \_\_\_\_/\_\_\_\_/2024 Amount. Paid: \$\_\_\_\_\_ Check No. \_\_\_\_\_