



OUT OF STATE VISITORS - REGISTRATION FORM

GRAND CHAPTER OF COLORADO, OES
132nd GRAND CHAPTER SESSION
"ALWAYS BETTER TOGETHER" SESSION
SEPTEMBER 18-20, 2025



Please register using this form OR online no later than September 1, 2025 at www.oes-colorado.org

ONLY ONE REGISTRANT PER FORM – Form may be duplicated

NAME: (Print) _____

Address: _____ City: _____ State _____ ZIP _____

Phone: () _____ Cell: () _____ E-Mail: _____

TITLES as of September 17, 2025: Grand Jurisdiction _____

Chapter Name & #: _____ City: _____

____ GGC Elective/Appointed Officer Title _____

____ GGCCM Committee _____

____ Grand Officer Title _____

____ Grand Officer Emeritus Title _____

____ Grand Representative of _____ in _____

WGM _____ WGP _____ PGM _____ PGP _____ WM _____ WP _____ AM _____ AP _____ PM _____ PP _____

Chapter Officer Title: _____

Additional Titles: _____

ESCORT TO: _____

ALL MEMBERS MUST PRESENT A CURRENT DUES RECEIPT WHEN PICKING UP REGISTRATION CARDS & PACKETS

Out of State Registration: Wednesday noon to 4:00 p.m. and 7:00 – 8:00 pm

Thurs. 7:00 a.m. to 8:00 a.m.

ALL MEMBERS ATTENDING ARE REQUIRED TO PAY THE \$30.00 (US CURRENCY) NON-REFUNDABLE REGISTRATION FEE.

Out-of-State visitors may register on-line at www.oes-colorado.org or mail this completed registration form with payment.

Make checks payable to Grand Chapter of Colorado (no cash by mail) or note credit card information below and

mail to: Scott Krebs, Grand Secretary; 2495 South Quebec Street, #60; Denver, CO 80231-6068

REGISTRATION MUST BE RECEIVED BY SEPTEMBER 1, 2025

For any Out of State Registration questions, please contact:

CherylAnn Craven-Lindblad, PGM Distinguished Guest Chairman Cell #: 970-396-3364 Email: asap4sure@gmail.com

CHECK # _____ CASH ☐ CREDIT CARD ☐ confirmation # _____ Total Amount \$ _____

Once Credit Card is processed, the lower portion will be removed and shredded. CC payments will incur a processing fee.

CREDIT CARD PAYMENT: Name as appears on card (Please print) _____

Billing Address (including ZIP code): _____

Card Number: _____ Exp. Date ____/____/____ CVV Security Code (from back of card) ____