



**COLORADO GRAND CHAPTER REGISTRATION
FOR OUT-OF-STATE MEMBERS ONLY**



“Kindness Is The Key”

130th Grand Chapter Session September 21-23 2023

**Grand Chapter will be held at the Double Tree by Hilton DTC,
7801 East Orchard Road, Greenwood Village, CO 80111**

\$20 Registration Fee is Non-refundable

PLEASE PRINT

NAME: _____ DATE: _____

Address: _____ City: _____ State: _____ ZIP: _____

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

Anticipated arrival date/time: _____

TITLE(S) as of September 21, 2023: Grand Jurisdiction of: _____ Chapter: _____ No.: _____

____ GGC Elective/Appointed Officer Title: _____

____ Ambassador/GGCCM Title: _____

____ Grand Officer Title: _____

____ Grand Officer Emeritus Title: _____

____ Grand Representative of: _____ in: _____

WGM WGP PGM PGP WM WP PM PP Other: _____

Additional or Other Titles: _____

ESCORT TO: _____

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

Out-of-State Registration: **Wed. 9/20/23, 1:30 p.m. to 5:00 p.m. and Thurs. 9/21/23, 7:30 a.m. to 10:00 a.m.**

Reservations for all meals must be made on the Meal Reservation Form

GRAND CHAPTER USE ONLY

2023 DUES CARD NUMBER: PRIMARY _____ PLURAL _____ PLURAL _____ PLURAL _____

CHECK # _____ CASH CREDIT CARD (see below) confirmation # _____

You may register online at: www.oes-colorado.org/registration (note online registration closes on 09/01) or fill out this form and mail it along with payment to Grand Chapter of Colorado; Attn: Grand Secretary; 2495 South Quebec Street, #60; Denver, CO 80231-6068. Make checks payable to **Grand Chapter of Colorado**. Any questions contact Colorado Out-of-State Registration Chairman, Shirley Day, GGCCM, 719-666-0368 or srday80829@gmail.com

****Use a separate form for each person A single check for a group is acceptable****

Credit card payments will incur a processing fee. Once Credit Card is processed, this portion will be shredded

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

CREDIT CARD Billing Address including ZIP code: _____

CREDIT CARD #: _____

Expiration Date: ____/____/____ Security Code: ____ (located on back of card)