

Auxiliary Unit Name: _____ Unit # _____

Mail to: Department Paymaster: Laurie Blair
16800 Blake Rd, Hagerstown, MD 21740 Phone 301-730-3242

2023 Department Convention Delegate Registration Form - MCL Auxiliary

- Delegates and Alternates to the Department Convention shall be determined on the basis of Unit membership strength reported to and on record with National Headquarters as of 31 March preceding the Department Convention. The Delegate voting strength of each Unit shall be as follows: For the first **fifteen (15) Regular members, one (1) Delegate and one (1) Alternate**; for each additional full block of fifteen (15) Regular Members, one (1) Delegate and one (1) Alternate; for a partial number of fifteen (15) members, one (1) Delegate and one (1) Alternate. Only members in good standing are eligible for election as a Delegate or Alternate (based on membership as of March 31). PLEASE PRINT LEGIBLY or TYPE.
- Registration Fees have been set at **ten dollars (\$10)** per Delegate or Alternate.
- Enclosed is a check #__ in the amount of \$ _____ made payable to Dept of MD MCL to cover the registration fees of the Delegates and Alternate to the Department Convention. (Use addition sheets if necessary)

Delegate / Alternate
(check only one)

Name and Unit Officer Title (if applicable)

INFORMATION PROVIDED WILL BE USED TO PRODUCE CONVENTION ID BADGE

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Print Name Unit President

Sign Name Date

Print Name Unit Secretary

Sign Name Date



Form must be mailed and postmarked no later than 21 April 2023

Auxiliary –Department of Maryland