

Fall 2020 National Committee Meeting Registration

Phoenix, Arizona, November 6 and 7

Registrant #1

First Name: _____ Last Name: _____

- National Committee Member
- Executive Committee Member
- Guest

Spouse or Other Adult Registrant

First Name: _____ Last Name: _____

- National Committee Member
- Executive Committee Member
- Guest

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Children

Meals will be provided for children at the same registration price as adults. Please provide names of children below and remember to include them in your ticket purchase.

1. _____
2. _____
3. _____

Meals

Meals included in registration are a meet and greet with finger food Thursday evening, lunch Friday, banquet Friday evening, lunch Saturday. Event host will contact you for meal choices.

Payment

_____ Number of registrations at \$65

\$ _____ National Committee dues at \$100 per year (required for voting privileges)

\$ _____ Total

Mail check to: Constitution Party National Committee
PO Box 1782
Lancaster, Pennsylvania 17608