

 **230 Washington Ave Extension, Albany NY 12203 - 518-456-8819**

**2018 HOUSE OF DELEGATES**

April 20, 2018

**Delegate Registration Form**

Please check one of the following:

1. I will be registering for the Full Program of the 2018 Annual Assembly.

2. I will not be registering for the Full Program of the 2018 Annual Assembly.

CHAPTER NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DELEGATE NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form to NYSCHP

Attn: Joelle Carroll: office@nyschp.org

March 15, 2017