

OREGON GRAND YORK RITE SESSIONS

APRIL 4th, 5th, & 6th, 2019

REGISTRATION FORM

Name: _____ Title: _____

Ladies Name (If she will be accompanying you): _____

Address: _____ Phone No. _____

City: _____ State: _____ Zip: _____

PRESENT & PAST OFFICES HELD:

_____ OF CHAPTER NO. _____ OF _____
_____ OF COUNCIL NO. _____ OF _____
_____ OF COMMANDERY NO. _____ OF _____
_____ OF GRAND CHAPTER R.A.M. OF _____
_____ OF GRAND COUNCIL, C.M./R. & S.M. OF _____
_____ OF GRAND COMMANDERY K.T. OF _____
OF GENERAL GRAND CHAPTER ROYAL ARCH MASONS
OF GENERAL GRAND COUNCIL OF CRYPTIC MASONS
OF GRAND ENCAMPMENT, KNIGHTS TEMPLAR

Other Masonic Titles: _____

If a personal representative of a presiding officer, please furnish the following information:

Name: _____ Title: _____ Jurisdiction _____

THE PERSONAL REPRESENTATIVES MUST HAVE WRITTEN CREDENTIALS FROM THEIR JURISDICTIONS, UNDER THE SEAL OF GRAND RECORDER OR GRAND OFFICER

LODGING RESERVATIONS:

The Mill Casino & Hotel

3201 Tremont Ave.
North Bend, OR. 97459
1-800-953-4800

State that you are with the Grand York Rite Masons of Oregon 2019

Rates will be: The Lodge: 1 or 2 persons \$90.00 per night, plus local taxes of 8%.
The Tower: 1 or 2 persons \$100.00 per night, plus local taxes of 8%.

Available from April 3, 2019 to April 7, 2019

Reservations must be made no later than **MARCH 25, 2019 Hotel is firm on this date.**

MEAL RESERVATIONS LADIES: NOTE: All are Breakfast Brunches

Thursday, April 4th No. of tickets _____ @ \$18.00 \$ _____ Chapter Ladies **9:00 A.M.**
Friday, April 5th No. of tickets _____ @ \$18.00 \$ _____ Council Ladies **9:00 A.M.**
Saturday, April 6th No. of tickets _____ @ \$18.00 \$ _____ Commandery Ladies **9:00 .A.M.**

MEAL RESERVATIONS MEN:

Friday, April 5th PAST or Present MIGM Luncheon (any Jurisdiction) **Yes** _____ **No** _____ 12:00 Noon

PLEASE NOTE: MIGM Luncheon -- send no money -- you will pay at the restaurant

Saturday, April 6th Commandery **Men's** Luncheon No. of tickets: _____ @ \$18.00 _____ 12:00 Noon

Grand York Rite Banquet:

(Please indicate your selection of dinner entrée and the number of each needed.)

Banquet Friday, April 5th, 2019 No. of tickets _____ @ \$35.00 \$ _____

6:00 pm No Host Bar, 7:00 pm Dinner

Your Choice: _____ Prime Rib Number each: _____

Or : _____ Salmon Number each: _____

TOTAL DUE: (INCLUDE BANQUET AND LUNCHES) \$ _____

DEADLINE FOR REGISTRATION, MEAL & BANQUET TICKETS IS **March 31st, 2019**

Complete this registration and meal ticket order form and mail, with your check, payable to:

Grand York Rite Bodies of Oregon

Mail to: David Fuller
4090 Commercial Street SE,
Salem, Oregon 97302

Phone 503 508-4397

email dfuller52@gmail.com

Tickets and registration packets will be available at the Grand York Rite registration table