

Credential Form – Provincial Accredited Delegate

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

___ Provincial Officer

This is to certify that:

Name **(please print)**: _____

Address: _____

is an Accredited delegate of the Ontario Provincial Council.

Signature of Provincial President: _____

Signature of Provincial Recording Secretary: _____

Return this form with your completed registration form.

Credential Form – Life Member Accredited Delegate

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

Please check one:

___ Honorary Life Member

___ Past Provincial President & Life Member

___ Life Member

Name **(please print)**: _____

Address: _____

Diocese: _____

Signature of Honorary/Life Member: _____

Copy of convention minutes: YES NO **(circle one)**

Return this form with your completed registration form.

Credential Form – Diocesan Voting Delegate

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

This is to certify that:

Name **(please print)**: _____

Address: _____

is the Voting delegate of the Diocese of: _____

Signature of Diocesan President: _____

Signature of Diocesan Recording Secretary: _____

Return this form with your completed registration form.

Credential Form – Diocesan Accredited Delegate (1)

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

This is to certify that:

Name **(please print)**: _____

Address: _____

is an Accredited delegate of the Diocese of: _____

Signature of Diocesan President: _____

Signature of Diocesan Recording Secretary: _____

Return this form with your completed registration form.

Credential Form – Diocesan Accredited Delegate (2)

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

This is to certify that:

Name **(please print)**: _____

Address: _____

is an Accredited delegate of the Diocese of: _____

Signature of Diocesan President: _____

Signature of Diocesan Recording Secretary: _____

Return this form with your completed registration form.

Credential Form – Parish Accredited Delegate (1)

This contact information will be used by the registration committee and provincial recording secretary for checking credentials, preparing voting cards and the credential record. Information will be destroyed once the convention is over.

This is to certify that:

Name **(please print)**: _____

Address: _____

Is the Accredited delegate of: _____ Parish Council.

Town/City: _____ Diocese: _____

Signature of Parish Council President: _____

Signature of Parish Council Recording Secretary: _____

Return this form with your completed registration form.