

South Carolina York Rite Convention Registration Form for the April 4-5 2024 session



(One person per form)

| Address | City | State | Zip |
|--|---|-------------------------------------|-------------------------------|
| Chapter/Court | Position | | |
| Contact Phone Number | Email Address | | |
| egistration: 115.00 Must be received no late 165.00 if received between Ma 215.00 if received after March | rch 16, 2024 through March | • | limentary bags n |
| V | ISITING JURISDICTIONS | | |
| \$55 (DOES NOT INCLUDE A BAI FROM THE JURISDICTION OF | • | | |
| GRATIS REGISTRATION | NS - Must be approved by eith | ner MEGHP, GMAM | l or their designed |
| HOLY ROYAL ARCH | Additional Tio | ckets: | |
| HEROINES OF JERICHO | Luncheon Fri | day \$45 | .00 |
| Order of High Priest | Banquet Tick | et\$60. | .00 |
| | :\$ | | |
| 6941 N. 7 | RDERS PAYABLE TO: The Gran Convention Frenholm Rd, Suite F104-Box A, SC 29206 | | R <mark>oyal ARCH</mark> MAIL |
| NOTE: Forms will not be prod | cessed unless proper money is | s included. | |
| Special Dietary: | | | |
| Any request for registration reference request will be honored). | unds must be in this office by M | <mark>arch 30, 2024</mark> via lett | ter ONLY (no phone |
| Emergency Contact Information | n: Name | | _ |
| | Phone | | |