



DAUGHTERS OF PENNSYLVANIA STATE ASSOCIATION I. B. P. O. E. OF W.

Temple Name _____ Temple No. _____

2025 PRE - REGISTRATION FORM

Part 1 - Temple Delegates (5) Council (3)

DT. _____ Delegate \$ _____

DT. _____ Delegate \$ _____

DT. _____ Delegate \$ _____

DT. _____ Delegate \$ _____

DT. _____ Delegate \$ _____

Total Delegates @ \$110.00 Each \$ _____

ALTERNATES

DT. _____ Delegate \$ _____

DT. _____ Delegate \$ _____

Part 2 - Non-Representation Fee \$100.00 \$ _____

Part 3 - Officer, Advisory Board, Past State President, Appointee

(Please Print Your Title On Lines Below)

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

DT. _____ \$ _____

Total Pre-Registrations @ \$110.00 Each \$ _____

Total Amount Paid with This Form \$ _____

Part 4 - Tickets

Achievement Award Banquet Tickets -

\$ _____

TEMPLE SEAL

Signature _____ Financial Secretary

Signature _____ Daughter Ruler

Distribution: Daughter State President: Purple

State Financial Secretary: Yellow

Temple: White

Please complete (typed or printed) and remit by April 30, 2025



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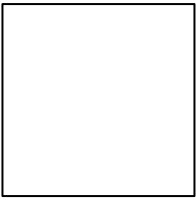
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