**CONVOCATION 2020 REGISTRATION FORM**

**PLEASE COMPLETE AND EMAIL TO** [**2020** **convo@gmail.com**](mailto:2020%20convo@gmail.com)

**OR POST TO**

***The 2020 Convocation Registrar***

***1 Springlea Heights, Atawhai, Nelson 7010***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Surname |  | | | | Given names |  |
| Preferred Name |  |
| Accompanied by Surname | | |  | | Preferred Name |  |
| Home Address | |  | | | | |
|  | |  | | | | |
|  | |  | | | | |
| Email address | |  | | | | |
| Chapter Name and Number | | | |  | | Highest Rank |

|  |  |
| --- | --- |
| **DELEGATIONS (Overseas and other orders)** | |
| Name of Order  Rank |  |

**EVENTS REQUIRING BOOKINGS AND PAYMENT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Registration  **HRA members**  **Only#** | Knights Templar Enactment | \*Meet & Greet | Ladies Tour | Banquet \* | Sunday Coach Tour |
| Cost | ***$70*** | ***$30*** | ***$35*** | ***$45*** | ***$80*** | ***$20*** |
| Total Number of  attendees |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |

# Registration fee applies only to the registered HRA attendee. HRA Companions and all Freemasons and families are welcome to attend the social events.

\*Please specify any special Dietary requirements below

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Vegetarian | Gluten Free | Diabetic | Other |
| **Special Dietary Requirements:**  **Banquet and meet and greet** |  |  |  |  |

**Payment**

|  |  |
| --- | --- |
| **PAYMENT OPTIONS FOR THE CONVOCATION**  Please place a tick C:\Users\David\AppData\Local\Microsoft\Windows\INetCache\IE\4BL3N1UN\tick[1].jpg beside your selected payment option | |
| My NZ Bank Cheque accompanies this registration. | $ |
| I have paid by Bank Transfer to account 02-0704-0055173-003 with my surname as **Particulars** and **convo2020** as the **Reference**. |  |
| **Overseas Visitors only** - I wish to pay in NZD cash upon arrival at the Convocation Reception Desk. | $ |

**STEP FIVE - PROVIDE FURTHER INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **TRANSPORT REQUIREMENTS**  If you require transport on arrival and departure please provide the information below. | | | |
| Arriving By | Air/Coach | Departing By | Air/ Coach |
| Arrival Time |  | Departing Date |  |
| Arrival Date |  | Departing Time |  |
| Flight/Service |  | Flight/Service |  |
| No of Persons |  | No of Persons |  |

|  |
| --- |
| **For contact purposes during the convocation please indicate where you will be staying and contact details.** |
| Grand Mercure Nelson Monaco. |
| Privately or hotel/motel. *Please provide name and address and phone number.* |

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| **Any other relevant information you wish to provide to the convocation organisers** |