



## Delegate Registration Form

First Name, Last Name	Delegate	Alternate	Virtual	In-Person	Member ID#

I hereby certify that delegates and alternates listed above have been chosen in accordance with Article VI of the NCRSP Constitution & Bylaws. The number of registrations tickets for delegates, alternatives and guests have been properly indicated and paid.

**Total Delegate Registrations:** \_\_\_\_\_

**Total Payment Enclosed:**  
(registration and lunch) \_\_\_\_\_

**Local Unit President Signature:** \_\_\_\_\_