

ADVISOR REGISTRATION: 2025 CONCLAVE

sponsored by The Grand Lodge of New Hampshire, Free & Accepted Masons

When: June 13th-15th, 2025

Print Name

Who: Advisors from all jurisdictions (one form per advisor)

Where : New Hampshire Army National Cost: \$145.00	Guara Training Genter, Traise	in date, denter but	11014, 1111
Make checks payable to "NH DeMolay"			
Mail checks and Registration to Mom V		, Pembroke NH 032	75
Or eMail to: Mom Wanda Cloutier at un	ionda@nhdemolay.org		
Send no later than: May 31st 2025			
DeMolay members need to complete th ThinkFast and banquet.	e DeMolay Registration. Regis	tration includes loc	lging, food, t-shirt,
Name:	Phone:		
Address:	City:	State:	ZIP
Email:			
Home Chapter:	Jurisdiction:	Γ-Shirt Size:	
In case of emergency, please contact	:		
Primary	Alternate		
Name:	Name:		
Cell#	Cell#		
Medications:			
Please list all medications you are current inhalers, over-the-counter medications medicine needed for the duration of the needed.	, vitamins and supplements. P	lease bring only the	amount of
Name of Medication	Dosage		
Frequency of Dose	Reason for Using	<u> </u>	_
Dinner will NOT be served Friday. Pleas Sunday firmly at 2:00 PM.	se eat before you arrive. Memb	ers to Arrive Friday	6:00 PM and Depart
The following signatures are required for Registrant is authorized to attend this I	, ,	orm, the signatorie	es agree that the

Signature

Date