

**REGISTRATION FORM**

<b>Full Name</b>	
<b>Address</b>	
<b>City</b>	
<b>State, Zip</b>	
<b>Phone</b>	
<b>Email</b>	
<b>Home Church Name, City</b>	
<b>PAYMENT</b>	
<b># of OSL Members</b> _____ x \$30 if postmarked by Saturday, Oct. 24 (\$40 starting Oct. 25) = \$ _____	
<b># of Non-Members</b> _____ x \$35 if postmarked by Saturday, Oct. 24 (\$40 starting Oct. 25) = \$ _____	
<b>Add'l Donation</b> (optional; circle one): for this <i>Chapter</i> or <i>Scholarship Fund</i> = \$ _____	
<b>TOTAL ENCLOSED</b>	\$ _____
<p><i>Scholarships are available for those in need. Please call to inquire.</i></p> <p><b>If you have NOT postmarked your registration by Oct. 25, please pay either at the door or online to ensure timely receipt.</b></p> <p>Mail this registration form with fee (checks payable to OSL) to:  <b>Paul Mulligan</b>  <b>1530 Key Boulevard, #118</b>  <b>Arlington, VA 22209</b></p> <p>(703) 465-1909 or <a href="mailto:PaulMulligan1@me.com">PaulMulligan1@me.com</a> .</p>	