ASSEMBLY REGISTRATION FORM

Assembly Date: _____

The Area, or a Group unaffiliated with an Area, submits the following names to the Region for acknowledgment as an authorized voting Group Service Representative, Alternate Group Service Representative, or Group Substitute at the above dated assembly.

SECTION A:

Member Name: First and Last/Initial: _____

Group Name: _____ Position: GSR ☐ Alternate GSR ☐ Group Substitute ☐

Email address: _____ Phone: _____

Member Name: First and Last/Initial: _____

Group Name: _____ Position: GSR ☐ Alternate GSR ☐ Group Substitute ☐

Email address: _____ Phone: _____

Member Name: First and Last/Initial: _____

Group Name: _____ Position: GSR ☐ Alternate GSR ☐ Group Substitute ☐

Email address: _____ Phone: _____

Member Name: First and Last/Initial: _____

Group Name: _____ Position: GSR ☐ Alternate GSR ☐ Group Substitute ☐

Email address: _____ Phone: _____

SECTION B:

ASC or RSC Officer, as applicable:

Signature: _____ Print: _____

Area: _____ Position: _____ Date: _____