



OMEGA LIFE MEMBERSHIP FOUNDATION, INC.

2019 Annual Corporate Meeting
Harrah's Resort Atlantic City
Atlantic City, NJ 08401
July 11, 2019

REGISTRATION FORM

NAME: _____ LM No. _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: (Home) _____ (Other) _____

E-MAIL: _____ CHAPTER: _____

I will attend the Annual Corporate Meeting **ONLY**. (No Admission Fee)

I will attend the Annual Corporate Meeting and the OLMF Memorial Luncheon

Omega Life Membership Memorial Luncheon Ticket (s) _____ X \$65.00 = \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

The Executive Director must receive this form and all fees by June 21, 2019

Larry A. Brown, Executive Director

Omega Life Membership Foundation, Inc.

PO Box 92882 Washington, DC 20090-2882

Make Check Payable to: **Omega Life Membership Foundation, Inc.**

MUST BE PRE-REGISTERED TO BE ELIGIBLE TO VOTE AT THE ANNUAL MEETING. THERE IS NO ON-SITE REGISTRATION FOR THE OMEGA LIFE MEMBERSHIP ANNUAL CORPORATE MEETING OR MEMORIAL LUNCHEON.

FOR OFFICE USE ONLY

Date Received _____ Amount Received _____

Check No. _____ Receipt No. _____