



**OUR LADY OF THE ANGELS REGIONAL FRATERNITY  
CHAPTER OF MINISTERS AND REGIONAL ELECTIONS**

**ATTENDING FORM - NOVEMBER 15, 2014**

**Minister's Name:** \_\_\_\_\_

**Fraternity:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**PLEASE CHECK ONE:**

**I will attend the Chapter Meeting** \_\_\_\_\_

**I am sending a delegate to represent me** \_\_\_\_\_

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**IF SENDING A DELEGATE, PLEASE COMPLETE BELOW:**

The delegate's name is: \_\_\_\_\_

I hereby certify that this delegate is a permanently professed member of my fraternity.

Signature of Minister: \_\_\_\_\_

Others attending as observers (please list names):

\_\_\_\_\_  
\_\_\_\_\_

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**PLEASE COMPLETE AND RETURN THIS FORM BY NOVEMBER 1<sup>ST</sup> TO:**

**Kate Asselin, OFS, Regional Secretary**

**45 Park Avenue, Apt.103**

**Verona, NJ 07044-2432**