



UFWDA

ORGANIZATION DELEGATE REGISTRATION

UFWDA Annual Convention and/or Delegate E-Mail Listing Registration

(Updates may be made anytime by resubmitting this form. Registration will expire as prescribed below or when the Organization is no longer in good standing. Delegates not properly registered will not be seated at the Annual Convention)

Delegates registered on this form represent the Authorizing Organization to UFWDA and are authorized to state opinions, make decisions, and vote on behalf of the named Organization.

Delegate #1

Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

The above delegate has been ___ voted or ___ appointed for a period ending on _____ {month} _____ {day}, _____ {year} to represent our Organization.

Delegate #2 (if applicable)

Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

The above delegate has been ___ voted or ___ appointed for a period ending on _____ {month} _____ {day}, _____ {year} to represent our Organization.

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Authorizing Organizations name: _____

Address: _____

President: _____

President's email: _____

President's signature: _____ Date: _____

Please mail or e-mail by June 28, 2015 to:

United Four Wheel Drive Associations
P.O. Box 316
Swartz Creek, MI 48473
treasurer@ufwda.org