

DETACHMENT NAME _____ **DET. #** _____

MARINE CORPS LEAGUE
 2009 DEPARTMENT CONVENTION
 June 24-27, 2009 in New Cumberland, PA

(Do Not Complete)
 Total Members:
 Total Delegates:
 Total Votes:
For Convention Use Only

To: Chairman, Credentials Committee - MCL of PA, Inc.
Via: Paymaster - MCL of PA, Inc.
584 Barrington Rd
Collegeville, PA 19426-3405

Subj: Registration of Delegates for the Department Convention

Ref: (a) Article One, Section 101, Department Bylaws

1. In accordance with reference (a), delegates and alternates to the Department Convention shall be determined on the basis of the Detachment strength, reported to and on record with the Department Paymaster by thirty (30) days preceding the Convention. The allowable representation shall be **one (1) delegate** and **one (1) alternate** for each block of **ten (10)** regular members and/or major portion thereof. Also, **one (1) delegate** and **one (1) alternate** for the Detachment Charter.

2. Registration fees have been set at **eight dollars (\$8)**, however, **advance registration** fees have been set at **six dollars (\$6)** if properly executed Credential forms are submitted, paid for and postmarked on or before **May 25, 2009**.

3. Enclosed is a check # _____ in the amount of \$_____ made payable to **MCL of PA, Inc.** to cover the registration fees of the Delegates, Alternate Delegates and Associate Members to the Department Convention. (Use additional sheets if necessary)

Delegate	Alternate	Assoc.	Guest	NAME(s)	Membership No.	Attending(Y/N)	For Convention Use
				1.			
				2.			
				3.			
				4.			
				5.			
				6.			
				7.			
				8.			
				9.			
				10.			

 (Print Name) Detachment Commandant

 (Sign Name and Date)

 (Print Name) Detachment Adj/Paymaster or Paymaster

 (Sign Name and Date)