



CHULA VISTA GENEALOGICAL SOCIETY

Seminar Registration Form

Fall Seminar – September 24, 2011

Please print this page and fill in the information requested in the form below. Enclose the form with your check for an amount to cover the number of attendees (\$35.00/attendee) and mail to arrive on or before September 15th.

Mail to: Chula Vista Genealogical Society
P.O. Box 3024
Chula Vista, CA 91909-3024

Doors open at 8:30am for check-in, program starts promptly at 9:00am.

Lunch Menu: Citrus Chicken, Asian Fusion Salad, Fresh Green Beans & Corn, & Rice Pilaf.

If there is a dietary need please indicate your needs in the comment area of the form below.

Your Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone (nnn-xxx-xxxx): _____

Email: _____

Number of Attendees: ____ Amount enclosed: _____

Are you a member of Chula Vista Genealogical Society: Yes No

Please enter any additional information or comments below

And tell us how you heard about our seminar:
