

## USW District 7 Conference

Blue Chip Casino Hotel Spa ♦ 777 Blue Chip Drive ♦ Michigan City, Indiana  
October 15-17, 2024

### REGISTRATION FORM

This is to certify that the following member(s) from Local \_\_\_\_\_ will attend the conference:

*Please print name(s) legibly and circle the appropriate shirt size for each delegate attending.*

- |     |       |   |   |   |    |     |     |     |     |
|-----|-------|---|---|---|----|-----|-----|-----|-----|
| 1.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 2.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 3.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 4.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 5.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 6.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 7.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 8.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 9.  | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |
| 10. | _____ | S | M | L | XL | 2XL | 3XL | 4XL | 5XL |

**\*\*\*Make additional copies of this form as needed.\*\*\***

To pre-register, you must either email a copy of this form to Katie Kraft (*preferred method*), or mail the original of this form to the Bridgeview Office at the address noted below, **prior to September 16, 2024.**

If your Local registers after this date, you will need to mail the original form and include a check for the appropriate registration fee(s) made payable to **USW District 7** by **October 1, 2024.**

Return to: USW District 7 Conference  
Attn: Katie Kraft  
7218 W 91st St  
Bridgeview IL 60455  
kkraft@usw.org

President \_\_\_\_\_

Date \_\_\_\_\_

Rec. Secy \_\_\_\_\_

Date \_\_\_\_\_

**\*\*\*Please make a *copy* of this form for your records.\*\*\***