**2024 REGISTRATION & PAYMENT **

CLUB NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­

Names of Rotarians (i) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best Tel #s (i) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail (i) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail (ii) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARTICULARS OF STUDENTS SPONSORED**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School** | **Name of Student** | **Phone Number** | **Speech Title** | **Name(s) of Parents** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Sponsorship Fee = $150 per student**

*(Includes refreshments & lunch for 1 student, 2 parents and up to 2 Rotarians)*

**All others: $15 per person. Children (under 12 years): $10 per child**

*(Includes refreshments & lunch)*

|  |
| --- |
| **PAYMENT** (\**For Sponsorship Fee)* |
| **Type** | **Number** | **Cost per Person** | **Total Cost** |
| Students |  | $ 150.00 |  |
| **PAYMENT** (*For all Others)* |
| Adults |  | $ 15.00 |  |
| Children |  | $ 10.00 |  |
| **TOTAL AMOUT DUE =**  |  |

Please make checks for the **Total Amount Due** payable to **RI District 6630** and mail to: **Port Summit Rotary, PO Box 383, Mogadore, OH 44260**

**Deadline to receive Registration Form & Payment is March 25, 2024**

Please use the space below to provide the names of all other adults and children attending.