



Convention Registration Form
83rd Annual Illinois NAACP State Convention
"WHEN WE FIGHT, WE WIN!!!"

Environmental & Climate Justice - Breathing Clean Air Is A Right, Not A Privilege!
2020 Census - Make Sure Your Counted
Commemorating the 100th Anniversary of the Chicago Race Riots

OCTOBER 18 - 20, 2019
Oak Lawn Hilton
9333 South Cicero Avenue
Oak Lawn, IL 60453

Section 1 - CONTACT INFORMATION

(Please provide the name and contact information of the person responsible for advance registration package pickup)
 NOTE: THIS PERSON MUST BE LISTED AS A PAID REGISTRANT ON THIS FORM.

Registering Person: _____

UnitName: _____ **UnitNumber:** _____

Address: _____ **City, State, ZIP:** _____

Telephone: _____ **Fax:** _____ **Email:** _____

Section 2 - REGISTRANT LISTING

REGISTRANT LISTING	ADULT (A)	YOUTH (Y)	VOTING	ALTERNATE	OBSERVER	PRESIDENT	VICE PRES.	TREASURER	SECRETARY
Name (Last, First, MI)									
*= Registering Person Responsible For Advance Registration/Ticket Pick-up			Yes No	Yes No	Yes No				
*			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				
			Yes No	Yes No	Yes No				

Please Mail Completed Forms & Remit Payment (Postmarked By September 30, 2019) to:

Illinois State Conference or PayPal: ilnaacp.ni@gmail.com
P.O. Box 20384 Springfield, IL 62708
Phone: 217/789-2721

PLEASE DO NOT MAIL, FAX OR EMAIL FORMS AFTER September 30, 2019

PLEASE RETURN THIS PAGE-PAGE 1 of 2

