

P.R.I.D.E. RITUAL COMPETITION
Installing Team Entry Form

Chapter Name: _____ Year of Competition: _____

Check Applicable Boxes

		Member of this Chapter with DD*	Under Age 21	Has Obligation Card
Installing Officer	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Councilor	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Junior Councilor	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marshal	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chaplain	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Deacon	Name: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I CERTIFY ON MY HONOR THAT ALL INFORMATION CONTAINED ON THIS FORM IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE

SIGNATURE: _____ TITLE: _____

NAME (Please Print): _____