2016 MINK Conference Ritual Competition Form

_____ _____
AERIE / AUXILIARY NAME AERIE / AUXILIARY #

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DISTRICT NAME STATE

Competition Class: check one:
B___B3____C___Novice____Shotgun____

List the respective Ritual Team Members by position below.

Position Name

Worthy / Madam Jr. Past President _____

Worthy / Madam President _____

Worthy / Madam Vice President _____

Worthy / Madam Chaplain _____

Worthy / Madam Conductor _____

Worthy / Madam Secretary _____

Worthy / Madam Inside Guard _____

Pianist _____

Contact Name & Number for Team _____
Also Email Address _____

Shotgun Participant's Name _____

Note: Section 5.1 of MINK By-laws: i.e. All contestants must be registered at Conference. All contestants must be in good standing.

Team Fee: $25 (due before Conference) Paid_____
Shotgun Fee: $5 per person (due before Conference) Paid_____
Desired Date & Time of Competition-1st_____
2nd _____

Send Aerie Form to: Rick Labbee, P.O. Box 398, Festys, MO. 63028
Auxiliary Form to: Patty Welch, 936 East 4th Street, York, NE. 68467