



**SPECIAL GENERAL MEETING
REGISTRATION FORM TO BE RETURNED WITH YOUR PAYMENT
DELEGATE FEE \$75.00**

DATE: _____

REGION: _____

NAME: _____

ADDRESS: _____

CITY: _____

PROVINCE: _____

TELEPHONE: _____

EMAIL: _____

SIGNATURE: _____

***Please make cheque out to National Congress of Italian Canadians. Mailing address:
NCIC (National Capital District)
1026 Baseline Road, Ottawa, Ontario K2C 0A6 or e-transfer to : ottawancic@gmail.com**