



**Class attending** \_\_\_\_\_

**Registration Form**

**Name** \_\_\_\_\_

**BI Member Yes No**

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Club Name (If applicable)**

**ADDITIONAL NAMES:**

**Name** \_\_\_\_\_

**Tele/email** \_\_\_\_\_

**Name** \_\_\_\_\_

**Tele/email** \_\_\_\_\_

**Name** \_\_\_\_\_

**Tele/email** \_\_\_\_\_

Amount Paid \_\_\_\_\_ (Make check payable to Philadelphia Area Chapter of BI)

**Mail payment(s) to:**

**Philadelphia Area Chapter of BI**

c/o Gloria Mankonen

1106 Cowpath Rd

Hatfield, PA 19440