

## 2017 Delegate and Area Information Worksheet

*This is not the official Conference registration form, just information we need please.  
(PLEASE SUBMIT ONE COPY OF THIS FORM FOR EACH DELEGATE SEPARATELY; ALSO  
PLEASE NOTE THAT IF YOU ATTEND THE CONFERENCE AS A NON-DELEGATE, YOU DO  
NOT NEED TO COMPLETE THIS FORM)*

**Please print *clearly*. Thank you!**

1. Region: \_\_\_\_\_

a. Trustee: \_\_\_\_\_

2. Area: \_\_\_\_\_

a. Chairperson's name: \_\_\_\_\_

b. Address: \_\_\_\_\_

c. City: \_\_\_\_\_

d. Home Phone: \_\_\_\_\_

e. Cell Phone: \_\_\_\_\_

f. Email address: \_\_\_\_\_

3. Meetings in area per week: \_\_\_\_\_

4. Number of Delegates in area: \_\_\_\_\_

5. List delegate(s) names, addresses, phone numbers & e-mail addresses, and how many times attended Conference as voting or current voting delegate from your area? Please list your Delegate Term start date and end date.

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_  
\_\_\_\_\_

6. Alternate Delegate(s) names, addresses, phone numbers, email addresses, term start and end date:

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will your area be holding elections for Area chair before the Conference? **Yes** or **No**?  
If so when?

**Please return by mail, fax or by email to:**

CAWSO  
21720 S. Wilmington Ave., Ste. 304  
Long Beach, CA USA 90810-1641  
Fax number: 310-559-2554  
E-mail: [cawso@ca.org](mailto:cawso@ca.org)