



Grand Lodge Ancient Free & Accepted Masons of Nebraska

155th Annual Communication

February 2-4, 2012 – Younes Conference Center, Kearney, Nebraska

LEAD OFFICERS OF APPENDANT BODIES OR GRAND MASTERS OF OTHER JURISDICTIONS (OR PERSONAL REPRESENTATIVE)


Name <input type="checkbox"/> DGC	Name of Spouse/Companion, if attending
Title	Appendant Body or Grand Jurisdiction
Email (if available)	Telephone <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
If a lodge delegate, or proxy, indicate Nebraska Lodge and Office: <input type="checkbox"/> Proxy	Do you have 50+ years of membership? <input type="checkbox"/> Yes Do you need a name badge? <input type="checkbox"/> Yes <input type="checkbox"/> No

– Meal Registration –

Tickets will not be available during the event, and must be purchased in advance

Thursday, February 2		Number Attending	Cost per Ticket	Total Cost
12:00 pm	Lodge Secretaries Lunch		x \$15.50	
7:00 pm (6:00 pm Social)	Grand Master's Banquet Meal Choice: List # of meals for each option	_____ Beef _____ Vegetarian	Complimentary	

Friday, February 3

7:00 am	Red Cross of Constantine Breakfast		x \$13.00	
11:30 am	Ladies Luncheon Meal Choice: List # of meals for each option	_____ Chicken _____ Vegetarian	x \$17.50	
12:00 pm	Veteran Freemasons Lunch (<i>Members only</i>)		x \$15.50	
12:00 pm	Membership Luncheon Meal Choice: List # of meals for each option	_____ Pork _____ Vegetarian	x \$17.50	
 7:00 pm	Membership Banquet		x \$26.00	
	"Masonic Relief Suits You!" Donation – Receive preferred seating and a Masonic Garment Bag to benefit the Masonic Relief Fund.	<input type="checkbox"/> Yes!	x \$50.00 (In addition to cost of dinner above)	

Saturday, February 4

7:00 am	Masonic Education Breakfast		x \$13.00	
	REGISTRATION FEE (<i>this fee is waived for registrations received before December 31 and is only necessary if meals will be attended.</i>)		\$10.00	

TOTAL AMOUNT DUE

(If paying by check, make checks payable to **Grand Lodge of Nebraska**)

OR Pay with Credit/Debit card: Cards accepted: Visa MasterCard Discover

Name on Card: _____ Billing Address: _____

Card Number: _____ City/State/Zip: _____

Expiration Date: ____/____/____ Signature: _____

– Hotel Information – Room reservations will be made for you in our room block at the Fairfield Inn

Arrival date: Feb/_____/2012	Departing: Feb/_____/2012	Number of Adults: _____
REQUIRED for Room Reservation – Guarantee Method: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover <input type="checkbox"/> Use payment card info above		Room Type: <i>cannot be guaranteed</i> <input type="checkbox"/> 2 Queen <input type="checkbox"/> 1 King
Credit Card Number: _____		Expires: ____/____

Return this form and payment **no later than January 6, 2012** to the Grand Lodge Office, 1240 N 10th St, Lincoln, NE 68508. No refunds will be made on cancellations received after January 6, 2012.