Entry Form (PRINT OR TYPE CLEARLY - <u>All</u> information must be filled in)
NAME:
ADDRESS:
PHONE NUMBER:
EMAIL:
BRANCH NUMBER:
(EMAIL CAN ONLY BE USED ONCE. No exceptions)
MISSING INFORMATION WILL AUTOMATICALLY CAUSE DISQUALIFICATION
Mail entry form to: Joanne Fibbi FCSU Fraternal Activities Director 6611 Rockside Road, Suite #300 Independence, OH 44131 (More than 1 entry form may be mailed in an envelope)
POSTMARKED NO LATER THAN Friday, March 1, 2024 And be RECEIVED by Friday, March 8, 2024. PLEASE PLAN AHEAD.