The Delta Kappa Gamma Society International
Texas State Organization Convention
Denton, June 24-26, 2025

All members must register. Please use one form per member. Only one form is necessary for a member with a guest. To avoid late fee, registration must be postmarked on or before May 15th. No meals may be ordered after June 1st. Address registration questions to Terrie Cardwell at 713-208-4923 or tcardwell003@comcast.net. Mail completed form to Terrie Cardwell, 2738 Fontana Dr., Houston, TX 77043 or email to tcardwell003@comcast.net if submitting electronically. Please type or print clearly.

NAME _____ _____ _____ _____ _____
Title Last First Middle Initial Badge Name

MAILING ADDRESS _____ _____
Street Address or PO Box

_____ _____ _____ _____ _____
City State Zip Chapter Area

Email address (for a receipt) _____ Cell Phone _____

Special Needs—Check all that apply. For special situations, email or phone Terrie Cardwell.
____Diabetic ____Vegetarian ____Gluten-free ____Limited Mobility ____Hearing/Visually Impaired

Please check all that apply.
___2024-2026 Chapter President ___1st State Convention Attendee ___Member for 50 or 50+ Years

Indicate number of tickets you need for each function. Cost includes tax, service charge and facility fee.

Registration Fee: (Check one that applies.)	**Cost**	**Number**	**Amount**
__2024-2026 Chapter President or __*Chapter Representative* **attending LDCP**	$ 0	_____	_____
All other member registration — postmarked on or before May 15	$ 50	_____	_____
Late Registration: postmarked after May 15 (No charge for chapter president or chapter representative)	$ 75	_____	_____
Guest's name for Guest Badge _____	$ 5	_____	_____
Leadership Social (Tues, June 24) Year attended LS_____	$ 35	_____	_____
Box Lunch (Tues, June 24) Sandwiches: ___ Veggie ___Turkey ___Ham	$ 25	_____	_____
State Personnel Dinner (Wed, June 25) *by invitation only*	$ 46	_____	_____
ASTEF Event (Wed, June 25) *tax deductible* (*Non-refundable donation)	$ 25	_____	_____
Birthday Lunch (Wed, June 25)	$ 46	_____	_____
Box Lunch (Thurs, June 26) Sandwiches: ___ Veggie ___Turkey ___Ham	$ 25	_____	_____
Presidents & Founders Banquet (Thurs, June 26)	$ 49	_____	_____
Continuing Professional Education Credit (CPE)	$ 20	_____	_____
Chorus Music—Chorus Participants Only	$ 20	_____	_____

Voice Part: ___Soprano I ___Soprano II ___Alto Interested in playing _____ prelude _____ postlude

Contribution to ASTEF *tax-deductible* (*Non-refundable donation).....____

TOTAL AMOUNT ENCLOSED ..... _____

_____CHECK (Payable to Texas State Organization Convention Fund) OR _____MasterCard _____VISA

Cardholder's Name _____ Billing Address _____

Card Number_____ - _____ - _____ - _____ Exp Date_____ 3-digit Sec. Code ___ ___ ___

**Cancellation requests must be made in writing to* Terrie Cardwell, 2738 Fontana Dr., Houston, TX 77043 *and postmarked by May 23rd. There is a $15 cancellation processing fee; no refunds after May 23, 2025.*
By your attendance at this event, you grant permission to be filmed, videotaped, audio taped or photographed by any means, and you grant full use of your likeness, voice and words without compensation.