## Human Rights Class Enrollment Form May 20-25, 2007 October 21-26, 2007

## William W. Winpisinger Education and Technology Center at Placid Harbor

Last Name:					
First Name:					
Middle Name:					
Title:		_Local Lod	ge #:	District Lodge	<b>#</b> :
Gender:		Territory: _			
Mailing Address:					
City:	Provir	nce/State:	Po	stal/Zip Code:	
Home Phone: ()		Wo	rk Phone: (_	)	
Cell Phone: ()		Fax	Number: (_	)	
E-Mail Address:					
Last 4 Digits of SSN/SIN:		(Mandatory	) IAM Boo	k No:	
(Impo	rtant: Please r	note if being ser	nt by: Local	_ or District)	
	9-25, 2007 lline March 16	, 2007 R		er 21-26, 2007 eadline August 3, 20	07
				re not guaranteed.	_
Approved by: LL President/Officer	Print Name and Title				
Or	Signature		Phone #:		_
Approved by: DL President/BR/GC	Print Name and Title				
	Signature		Phone #:		_
	IAMAW 9000 M Upp	eturn via mail HUMAN RIGHT ACHINISTS PLA PER MARLBORG FAX: (301) 96	S DEPARTME ACE, ROOM 30 MD 20772		
Our Lodge participated in:	2006	2005	2004	2003	
When registration requests William W. Winpisinger Eduinformation.					
Note: Please duplicate thi	s form for se	cond choice	participant a	nd check box.	

All requested information must be provided. Incomplete forms will not be processed nor will they be returned for completion.