

PARADE OF CHAMPIONS ENTRY FORM

RETURN THIS ENTRY FORM TO:

Please Type or Print Plainly

Grand Auxiliary Ritual Chairman  
Grand Aerie, F.O.E.  
1623 Gateway Circle So.  
Grove City, OH 43123

Auxiliary Name \_\_\_\_\_ No. \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Please specify which class. If entered in Shotgun, please just check (✓).  
All others, please write the class you will be competing in.

Ritual Team Class \_\_\_\_\_

Field Drill Class \_\_\_\_\_

Shotgun \_\_\_\_\_

Captain's Name \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip \_\_\_\_\_

(If an additional unit is being entered, please fill out form below)

-----PLEASE TEAR HERE-----

PARADE OF CHAMPIONS ENTRY FORM

RETURN THIS ENTRY FORM TO:

Please type or Print Plainly

Grand Auxiliary Ritual Chairman  
Grand Aerie, F.O.E.  
1623 Gateway Circle So.  
Grove City, OH 43123

Auxiliary Name \_\_\_\_\_ No. \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Please specify which class. If entered in Shotgun, please just check (✓).  
All others, please write the class you will be competing in.

Ritual Team Class \_\_\_\_\_

Field Drill \_\_\_\_\_

Shotgun \_\_\_\_\_

Captain's Name \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip \_\_\_\_\_