

## PARLIAMENTARY PROCEDURE

CHECK ONE CATEGORY: (52) \_\_\_\_\_ Junior: through grade 9

(53) \_\_\_\_\_ Senior: grades 10 – 12

(54) \_\_\_\_\_ Occupational: grades 10 - 12

For each chapter, **include a copy of the chapter affiliation** showing the date DUES were sent to National Headquarters. Deadline for membership: MARCH 1.

Participant information: A team, four to eight members, may represent NYS at National. Use 2-3 sheets.

1. Participant's name \_\_\_\_\_

Home address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_ Grade this year \_\_\_\_\_

2. Participant's name \_\_\_\_\_

Home address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_ Grade this year \_\_\_\_\_

3. Participant's name \_\_\_\_\_

Home address \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_ Grade this year \_\_\_\_\_

Subject and title of project \_\_\_\_\_

Advisor's name \_\_\_\_\_

School name \_\_\_\_\_

School address \_\_\_\_\_

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

Phone (s) \_\_\_\_\_ E-mail \_\_\_\_\_

Return to: Janet Stout, 354 Lakeside Rd, Angola, 14006; 716:549-3386; [djstout9@verizon.net](mailto:djstout9@verizon.net)

I certify that the above chapter has met all the specifications in the STAR Events Manual

District Advisor \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_