

California Grand Assembly Membership Award Order Form

Please send **ONE** order form for **EACH** Assembly. Shipping will be \$2.50 for total of all orders from one **Deputy**

CA Top Bar \$3.00	R \$1.50	A \$1.50	I \$1.50	N \$1.50	B \$1.50	O \$1.50	W \$1.50	POG N/C
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Name of Girl/Adult
Receiving Award _____

<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>
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Date Initiated _____ New Initiate's Name _____

Name of Girl/Adult
Receiving Award _____

<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>	<input style="width: 30px; height: 30px;" type="text"/>
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Date Initiated _____ New Initiate's Name _____

Make checks payable to: GRAND ASSEMBLY *Remember - two signatures required on Assembly checks!

Amount of Order _____

Shipping **\$2.50**

Total Enclosed _____

VISIT:

www.gocarainbow.org

for additional forms

Mail To: Dee Keck, PMA, Chairperson
3200 Canyon View Drive
Oceanside, CA 92058
(760) 231-9196
E-Mail: 4dees@cox.net

Please Note:
Only one girl OR one adult may receive
an award for each initiate

Assembly _____

Contact Person _____

Address _____

Phone Number _____

E-Mail _____