

2017 FOCL Conference Registration Form

Name of Friends Group _____

Is your group or are you a member of FOCL?

Yes → Number attending _____ x \$25/person = \$ _____

No → Number attending _____ x \$35/person = \$ _____

FOCL membership is \$50 per year - Go to FOCLib.org

Names of Attendees _____

(list additional names of back of form)

Registration Cut-off:

Postmarked by November 11, 2017

NO REGISTRATIONS AT THE DOOR

Make checks payable to: FOCL

Mail to: Frank W. Ridley
360 Broad Street, Apt B4
Meriden, CT. 06451