

**DAYTON INTERNATIONAL FESTIVAL, INC.**  
**DELEGATE/ALTERNATE FORM**  
**For the Festival Year \_\_\_\_\_**

NAME OF ORGANIZATION \_\_\_\_\_

The undersigned member of the above organization wishes to continue its membership in the Dayton International Festival, Inc. for the above-noted year and submits the following pertinent information on behalf of that organization:

Please print information for delegate and alternate(s), one of whom will attend the monthly meetings from September \_\_\_\_\_ to September \_\_\_\_\_. (Please use separate sheet to list additional delegates).

DELEGATE \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

ALTERNATE \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

ALTERNATE \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

PRESIDENT \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

TREASURER \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

ENTERTANMENT CO-ORDINATOR \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

The signer of this form is currently a delegate in good standing with the Dayton International Festival, Inc. and understands that the above information is officially entered into the records of DIFI. Any changes will be accepted by the secretary only when such information is submitted in writing or via email.

DELEGATE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Please complete and return at the September meeting (in the box by the door) or mail to:

DIFI  
P. O. Box 384  
Dayton, OH 45404

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