



## 2012 North Florida Seasons of Refreshing Pre-registration Form

Print Information Below & Return Completed Form to K. Cooley by 1/31/12

Name(s): \_\_\_\_\_ CMA Number(s): \_\_\_\_\_

Name(s): \_\_\_\_\_ CMA Number(s): \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Chapter Name & Number: \_\_\_\_\_ Colors earned: \_\_\_\_\_ Yes \_\_\_\_\_ No

Check made out to:  
CMA Treasurer of Florida

Mail check & pre-registration form to:  
Kathy Cooley  
15125 Cape Dr N  
Jacksonville, FL 32226