



**Pennsylvania Conference  
Investiture Attendance Request  
Form**



Name of Club \_\_\_\_\_

Location of Club Meeting \_\_\_\_\_

Contact Person \_\_\_\_\_

Evening Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

1<sup>st</sup> Choice:  
Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

2<sup>nd</sup> Choice:  
Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

3<sup>rd</sup> Choice:  
Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

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**Send to:** PA Conference of Seventh-day Adventists  
Attn: Youth Dept  
2359 Mountain Rd  
Hamburg, PA 19526

**Email:** [llanda@paconference.org](mailto:llanda@paconference.org)

**Fax:** 610-374-9331