Proficiency Excellency Program

REGISTRATION FORM

(Check Preference)

Ritual_____Laws_____Secret Work_____Floor Work_____

IS THIS A REPEAT TEST? YES____NO____

(Circle One Location)

1. August 1, 2026 **Location**: Ocala Chapter No. 29
   1846 SE 36th Avenue, Ocala, Fl 34471

2. October 31, 2026 **Location**: Ocala Chapter No. 29
   1846 SE 36th Avenue, Ocala, Fl 34471

3. January 30, 2027 **Location**: Ocala Chapter No. 29
   1846 SE 36th Avenue, Ocala, Fl 34471

Tests will start at 9:00 A.M.
Circle best scheduled time for you - A.M. or P.M. (No Guarantees)

Name_____
Address_____
City_____Zip_____
Phone_____Cell_____E:Mail_____
District_____Chapter_____No._____

Registration Fee $10.00 per test. Check No._____

Make check payable to: **The Grand Chapter of Florida O.E.S., Inc.** and mail to:

B. Joann Green, P.G.M.
Chairman of Proficiency
P. O. Box 488
Silver Springs, FL 34489

(For Chairman's Use Only)

Scheduled Time_____Notified_____Reg. Number_____