

**CERTIFICATION OF ELECTION OF DELEGATES AND ALTERNATES
TO THE ANNUAL FLORIDA CKI DISTRICT CONVENTION**

This is to certify that the following individuals are duly elected delegates and alternates to represent the CKI Club of _____ at the Florida CKI District Convention.

DELEGATES

Delegate 1:

Name _____ School _____

E-mail _____ Phone _____

Delegate 2:

Name _____ School _____

E-mail _____ Phone _____

Delegate 3:

Name _____ School _____

E-mail _____ Phone _____

ALTERNATES

Alternate 1:

Name _____ School _____

E-mail _____ Phone _____

Alternate 2:

Name _____ School _____

E-mail _____ Phone _____

Alternate 3:

Name _____ School _____

E-mail _____ Phone _____

Signature of Elected Club Officer: _____

Printed Name of Elected Club Officer: _____

Office Held: _____ **Date:** _____