



Minnesota Law Enforcement Explorer Association

2017 State Conference Registration

(Please Print or Type)

Explorer Post and Number: _____

Contact Person: _____

Phone Number (Day): _____ (Evening): _____

Phone Number (Cell): _____

Email Address (Required): _____

Please group your explorers, with four in a room, and all in that room the same sex.

Room	Check One Sex	Please Type or Print Legibly Explorer Name	Room	Check One Sex	Please Type or Print Legibly Explorer Name
A	1	M / F	D	1	M / F
A	2	M / F	D	2	M / F
A	3	M / F	D	3	M / F
A	4	M / F	D	4	M / F
B	1	M / F	E	1	M / F
B	2	M / F	E	2	M / F
B	3	M / F	E	3	M / F
B	4	M / F	E	4	M / F
C	1	M / F	F	1	M / F
C	2	M / F	F	2	M / F
C	3	M / F	F	3	M / F
C	4	M / F	F	4	M / F

Check One Sex	Please Type or Print Legibly Advisor Name	Cell Phone (Required)	Email Address (Required)
1	M / F		
2	M / F		
3	M / F		
4	M / F		
5	M / F		
6	M / F		

Special Requests: _____

Number of Vehicles: _____ Type of Vehicles/Trailers: _____