



Scholarship Form for the Mid-Atlantic Regional Conference

October 23-24, 2020

Name _____

Address _____

Phone _____ Email _____

Full registration fee is \$50. Full and partial scholarships are available.

Amount of scholarship requested _____

**Amount approved _____

Send or email request to Reservations: Adelynrood, 46
Elm Street, Byfield MA 01922 or

Reservations@Adelynrood.org

** This is NOT your registration form.