



**CIVIL AIR PATROL
NORTH CENTRAL REGION
CHAPLAIN SERVICE STAFF COLLEGE – 2003
21-24 April 2003**

NAME: _____
GRADE: _____ **CAPSN** ____ - ____ - ____ **CAPID** _____
MAILING ADDRESS: _____

PHONE: () ____ - ____ **OFFICE** () ____ - ____

Email Address _____

CAP UNIT ASSIGNMENT _____

CHARTER: NCR- ____ - ____

YEARS ATTENDED ANY REGIONS CSSC:
1984 1985 1986 1987 1988 1989 1991 1992 1993 1994 1995 1996
1997 1998 1999 2000 2001 2002 (Circle all that are documented)

DID YOU GRADUATE FROM CSSC?
YES__ NO__ WHEN_____ WHAT REGION_____

**____ I WILL BE FULFILLING MY SECOND YEAR WITHIN FIVE
YEARS OF GRADUATING REQUIREMENT. I WANT TO RECEIVE
A NCR/CSSC DIPLOMA UPON COMPLETION OF THIS EVENT.**

I need a receipt: Yes No

I want Missouri School of Religion CEU: Yes No

Dietary issues _____

Faith Group _____

Shirt size _____ **Neck size** _____

**MILITARY SUPPORT AUTHORIZATION (MSA) WILL BE PREPARED
THROUGH NORTH CENTRAL REGION LO HEADQUARTERS ONLY
(MSA's will be distributed at check in time Monday evening and
keep it with you at all times)**

**NCR CHAPLAIN SERVICE STAFF COLLEGE
COLUMBAN FATHER'S RETREAT HOUSE
ST. COLUMBANS NEBRASKA 68056
EMERGENCY PHONE: (402) 291-1920**

REGISTRATION FEE

__ OPTION "A" Chaplain Service personnel staying on campus

Includes registration, up to four nights lodging @Columban's Retreat House, ten meals (including banquet) and Monday evening's social and refreshments served during class sessions \$100.00

__ OPTION "B" Chaplain Service personnel not staying on campus

Includes registration, banquet and Monday evening's social and refreshments served during class sessions (LODGING AND MEALS AT YOUR EXPENSE) \$35.00

**CHECKS PAYABLE TO: NCR/CSSC 2003
RETURN REGISTRATION FORM WITH CHECK FOR ENTIRE AMOUNT:**

CH., LTC, DONALD MIKITA, CAP

EMAIL: dmikitta@hotmail.com

133 E FOURTH ST.

RED WING MN 55066

PHONE: (651) 388-7288 (H) (651) 385 6360 (W)

Suspense date: 8 April 2003 5 PM