

GREAT PLAINS LIONS LEADERSHIP INSTITUTE

- WHAT** GPLLI is an intensive, professional and valuable leadership skills program for Lions who have not served as District Governor within the last five years. You will learn skills for club, job, community and church, as well as personal development.
- WHEN** July 26-28, 2019. Registration is from 9:00A.M. to 11:00 A.M. Friday, July 26. Adjournment and checkout is by 3:P.M. Sunday, July 28, 2019. Lunch on Friday, July 26 is at 12:00 noon sharp.
- WHERE** Northwest Missouri State University, Maryville Missouri
- COST** US\$190 per attendee if received by the Registrar on or before May1, 2019. Cost increases to US\$210 beginning May 2, 2019. Registration covers double occupancy room, seven meals, and all course materials. Single occupancy rooms, if available, require an additional US\$40. Any remaining costs will be covered by funding from Lions Clubs International and contributions from participating multiple districts.
- WHO** Any Lion, Lioness or Leo who has attained majority and who has not served as a District Governor in the past five years is eligible. No previous attendees are eligible without prior approval of the Institute Coordinator, PID Bill Phillipi.

This institute is being sponsored by Multiple Districts 9 (Iowa), 17 (Kansas), 26 (Missouri) and 38 (Nebraska).

Dynamic presenters from across the Great Plains will provide emerging Lion leaders with modules on communication skills, team building, delegation, time management, conflict management, project management, diversity, motivation, goal setting/action planning/personal mission statement and leading effective meetings.

For additional information please contact Registrar PID Gary Fry at frygj35@msn.com or 515-967-4645.

PLAN NOW TO ATTEND THE INSTITUTE

Sponsored by the Lions of Multiple Districts 9, 17, 26 and 38
Northwest Missouri State University
Maryville, Missouri
July 26-28, 2019

REGISTRATION FORM (Please type or print legibly)

NAME _____ **Badge Name** _____ **LCI #** _____ **Gender** _____
Last First Initial

ADDRESS _____
Street/PO Box City State/Province Zip/PC

PHONE () _____ () _____
Home Bus/Cell Email

Home Club. _____ **Sub District Number** _____
Years in Lions _____ **Highest Office Held** _____

Registration Fee is US\$190 if received by the Registrar by May1, 2019, and must accompany the registration form. Beginning May 2, 2019, the base fee increases to US\$210. Make checks payable in US funds to GPLLI and, along with the registration form, mail to Registrar PID Gary Fry, PO Box 606, Mitchellville, IA 50169. Sorry, no refunds can be made for cancellations.

Applications will not be accepted without full payment.

Your registration fee includes seven meals, all Institute costs and dormitory rooms (double occupancy) at Northwest Missouri State. Please note that the dormitories are smoke free. A limited number of single occupancy rooms are available at an additional cost of US\$40. You are permitted to request a specific roommate. Check in at the dormitory is permitted from 9:00 A.M. to 1:00 P.M. on Friday, July 26th and check out must be completed by 3:00 P.M. on Sunday, July 28th. **We offer a souvenir shirt for an additional US\$25. Shirt size _____ (they run a little large).**

The following information must be completed before registration will be accepted.

- _____ Single occupancy room requested (Add US\$40. to registration fee)
- _____ Diabetic Diet requested
- _____ Vegetarian Diet requested
- _____ Wheelchair Access required
- _____ Vision Impaired (List what accommodation(s) are needed)
- _____ Hearing Impaired (List what accommodation(s) are needed)

Please list any other special requests _____

Questions about the Great Plains Lions Leadership Institute may be directed to: PID Gary Fry, Registrar, PO Box 606 Mitchellville, IA 50169 or 515-967-4645 or frygj35@msn.com.

EMERGENCY CONTACT INFORMATION

We are asking for the following information in case of an emergency arising during the 2016 Institute. This information will be maintained until the close of the Institute and then shredded.

Emergency Contact Name _____ **Relationship** _____

Contact telephone: HOME _____ WORK _____ CELL _____

Medical information that needs to be shared with emergency responders: Please feel free to use the back.
