

CVMA® North Carolina Rider Program Application
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NAME		MEMBER #	
CHAPTER		Date of Application	

ATTENDANCE LOG
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CHAPTER	DATE	EVENT	CEB INITIALS
15-1			
15-2			
15-3			
15-4			
15-5			
15-6			
15-7			
15-8			
15-9			
15-10			
15-11			
15-12			
15-13			
15-14			

PATCH PAID DATE:	VERIFIED BY
201 ENTRY DATE	SEB OFFICER
PATCH SHIP DATE	VERIFIED BY