



# 45<sup>th</sup> National Kolping Convention

September 18<sup>th</sup>, 19<sup>th</sup>, & 20<sup>th</sup>, 2026

REGISTRATION FORM

Registrant #1:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Kolping Family: \_\_\_\_\_

*Please Circle all that apply:* National Board Member/Officer    Delegate    Non-Delegate    Local Family  
Board Member/Officer    Child (12 & Under- Free)    Child (13-18: \$65)    Other

Registrant #2:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Kolping Family: \_\_\_\_\_

*Please Circle all that apply:* National Board Member/Officer    Delegate    Non-Delegate    Local Family  
Board Member/Officer    Child (12 & Under- Free)    Child (13-18: \$65)    Other

(#) \_\_\_\_\_ Registrants @ \$245/person = \$ \_\_\_\_\_    (#) \_\_\_\_\_ Registrants @ \$65/person = \$ \_\_\_\_\_

Yes, I will mail in a check

MAIL CHECKS TO: Catholic Kolping Society New York, Attn: 2026 Convention Registration, 165 88th Street, New York, NY 10128

Yes, I will pay by Credit Card

If paying by Credit Card: • Fill out this form completely and mail to the address above  
• Go to [www.kolping.org](http://www.kolping.org) National Convention and Click the "Pay by Credit Card" button  
• Select the number of registrants for which you are paying • Remember to enter \$0 for no fees at check out