Greetings:

Under the new leadership of President & CEO, Derrick Johnson, I am pleased to announce the re-launching of the NAACP Medgar Evers Civil Rights Advocacy Training Institute (CRATI)!

The theme for the 2018 CRATI is:

**NAACP: “Purpose, Passion, Political Action”**

Training and information disseminated at the Region VII Civil Rights Advocacy Training Institute, will empower and invigorate our civil rights leaders in our State Conferences, Branches, Youth Councils and College Chapters. We will impart new information and provide the skills needed to build and strengthen our advocacy for justice and equality in every arena of our society. Sessions will be conducted to enhance the ability of NAACP Units to function more effectively, strengthen unit administration and management “our Purpose,” increase the capacity of our leaders to be effective civil rights advocates, “our Passion,” and increase civic engagement in our communities, protecting the right to vote and participation in the political process in 2018, our “Political Action.”

All Unit Officers, Chairpersons of Standing Committees and Committee Members are encouraged to attend. NAACP leadership from across the region, who are committed to the mission of the NAACP and are proactive and responsive to the racist nationalist agenda that is being perpetrated in our nation today, must attend the Region VII CRATI with *Purpose, Passion, and Political Action*.

Unlike the NAACP National Convention, CRATI registration from your State Conference, Branch, Youth Council or College Chapter, participation is not based on membership strength or compliance. We want the leadership of all NAACP Units to participate, learn share, network and grow, increasing the advocacy and power on the local and state level, of the National Association for the Advancement of Colored People!

CRATI participants will return to their respective Units and communities energized and prepared to do the work and train their members to be the strong civil rights activists, our country needs at this pivotal moment in the Association and in our nation.

Sincerely,
Individual Registration Form

Name: ____________________________________________________________

Unit Name: ___________________________ Unit # _______________________

Address: ____________________________ City: _________________________

State: ___________ Zip code: ________________________________

Phone: ___________________________ Email: ________________________

Adult Registration $65.00

Youth Registration $30.00

Total Amount Remitted: $____________________

Please make checks or money orders payable to:

NAACP National Headquarters

Please mail all forms to:

NAACP National Headquarters

Attn: Audrey Lamyssaire, Manager of Constituent Services

4805 Mt. Hope Drive

Baltimore, MD 21215

NOTE: PLEASE RETURN THIS FORM WITH YOUR CHECK/MONEY ORDER OR CREDIT CARD AUTHORIZATION FORM AND MAKE A COPY FOR YOUR RECORDS.
Group Registration Form

Unit Name: _____________________________ Unit # __________________

Address: _____________________________ City: __________________

State: ___________ Zip code: ________________

Phone: ___________________ Email: ____________________

Person responsible for packet pick up: __________________

# Adults Registrations ______ @ _______ $________________

# Youth Registrations ________ @ _______ $________________

Total Amount Remitted: $____________

Adult Registration(s) Please Print Legibly

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Credit Card Authorization Form

Information of Credit Card Holder

Print Name (as it appears on the card) ____________________________________________

Mailing Address __________________________________________________________________

City, State, Zip Code ____________________________________________________________

Home Telephone (area code, number) ______________________________________________

Credit Card Type (circle one): Visa    Discover    MasterCard    American Express

Card Number ___________________________ Expiration (month/year) __________

Last 3 digits on back of Credit Card _____________________________________________

I authorize the NAACP to charge the amount of $________________________ to my card, for the

purpose(s) listed below:

__________________________________________________________________________

Authorized Signature ___________________________ Date __________

Please submit this form along with payment to be received by the National Office:

NAACP National Headquarters
Attn: Audrey A. Lamyssaire
Field Operations & Membership Department
4805 Mt. Hope Drive, Baltimore, MD 21215

Should you have any questions or concerns, please call Ms. Lamyssaire at 410.580.5111.

NOTE: PLEASE RETURN THIS FORM WITH YOUR CHECK/MONEY ORDER OR CREDIT
CARD AUTHORIZATION FORM AND MAKE A COPY FOR YOUR RECORDS.