

FantaSciCon 2016 Registration Form

Please Print Clearly. This form cannot be processed unless you specify your Date of Birth.

NAME _____ DoB _____

BADGE NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL _____

Do You Want To Save \$5? Be A Volunteer Staff Member. Yes No

Signature _____ Date _____

Other members from this address.

NAME _____ DoB _____

BADGE NAME _____

Do You Want To Save \$5? Be A Volunteer Staff Member. Yes No

Signature _____ Date _____

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All Persons under 18 must be accompanied by parent or adult guardian.

FantaSciCon is not responsible for any fire, theft or accident occurring during the convention. Photos/Videos taken during the convention may be used on our Photo CD/DVD and/or our web site. Forms postmarked after March 1st will not be processed.

REGISTRATION RATES

\$35.00 Until Feb. 28th, 2016 - \$50.00 Thereafter and at the door.

Number Registering _____ x (Rate) \$ _____ = \$ _____

TOTAL FUNDS DUE \$ _____

SEND FUNDS TO:

FantaSciCon
c/o L. D. Stacy
395 Stancil Rd.
Rossville, GA 30741

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