

Albacon 2003 Registration Form

Today's Date: ____/____/2003

Through March 23, 2003

Adult Memberships @ \$30 x _____ = \$ _____

Age 7 - 12 Child Memberships @ \$15 x _____ = \$ _____

Between March 23, 2003 and September 13, 2003

Adult Memberships @ \$35 x _____ = \$ _____

Age 7 - 12 Child Memberships @ \$20 x _____ = \$ _____

After September 13, 2003, DO NOT MAIL THIS FORM, please bring it to the Registration Desk at **Albacon 2003**

Adult Memberships @ \$45 x _____ = \$ _____

Age 7 - 12 Child Memberships @ \$25 x _____ = \$ _____

Total = \$ _____

Name: _____

Badge Name (if different): _____

Please list other Names and Badge Names on back.

Address: _____

City: _____ State: _____ ZIP: _____

Country: _____ Postal Code (non US): _____

Do you want to receive updates about **Albacon** via Email (**Albacon** does **NOT** share it's email addresses with any other organization): **Yes** / **No** (circle one)

Email address: _____

Do you want to help at **Albacon**: **Yes** / **No** (circle one)

How did you hear about **Albacon** (check all that apply):

____ Another Convention, which one: _____

____ Publication, which one: _____

____ Friend (word of mouth)

____ Other: _____

Send this form with check or money order (no cash please) to:
Albacon, P.O. Box 2085, Albany, NY 12220-0085, USA