

HallowCon 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 _____

NAME _____ DoB _____

BADGE NAME _____

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

Signature _____ Date _____

NAME _____ DoB _____

BADGE NAME _____

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

Signature _____ Date _____

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

HallowCon 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 September 15th will not be processed.

REGISTRATION RATES

\$35.00 Until Sept. 30th, 2010 - \$50.00 Thereafter and at the door.

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

T-Shirts M thru XL \$15, 2XL \$17, 3XL \$19

SIZES - M ___ L ___ XL ___ @\$15 TOTAL \$ _____

2XL ___ @\$17 3XL ___ @\$19 TOTAL \$ _____

TOTAL FUNDS DUE \$ _____

SEND FUNDS TO:

HallowCon

c/o L. D. Stacy

395 Stencil Rd.

Rossville, GA 30741

HallowCon 2010 Registration Form

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