

Registration Form

Please print clearly.

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ E-mail _____

Please indicate number attending

Conference Registration (received by Friday, February 26):

___ \$150 (includes 10th Anniversary Banquet on Saturday evening) OR \$ _____

___ \$125 (not attending banquet) \$ _____

Late Registration (received Saturday, February 27 until Tuesday, March 16):

___ \$170 (includes Saturday banquet) \$ _____

This option is only available until Wednesday, March 10.

___ \$145 (not attending banquet) \$ _____

In-person Registration on Saturday, March 20:

___ \$175 (Reservations to banquet not accepted) \$ _____

Registration for all college/university students:

Students must be enrolled in at least one credit course in the 2010 spring semester.

Fax copy of current college/university ID card to 856.351.2639.

___ \$45 (includes banquet) – received by Wednesday, March 10 \$ _____

___ \$20 (not attending banquet) \$ _____

TOTAL: \$ _____

Please choose one:

Check enclosed for \$ _____ (payable to Salem Community College)

Charge my credit card: ___ MasterCard ___ VISA ___ American Express

Name on Card _____

Card Number _____ Expiration Date _____

Cardholder's Signature _____

Mail this form with check or credit card authorization to:

2010 International Flameworking Conference

Salem Community College

460 Hollywood Avenue

Carneys Point, NJ 08069-2799

or fax with credit card authorization to: **Mickey McAllister, 856.351.2639**

International Flameworking Conference