

Guests of Program Participant Membership Registration Form — Balticon) \$

Use this form to purchase memberships for your children, one (1) spouse/significant other, or (if you are a participant with special needs) your support companion.

Participant Legal Name: _____ Badge Name: _____

Child = Ages 6 to 12. Children under Age 6 admitted FREE if with an adult AT ALL TIMES. If you are a minor, your parents qualify for this membership. Adult = Ages 13 and up. Adults eligible for this discount are (1) Your Spouse, Significant Other or Life Partner, (2) Your children ages 13 to 18 and (3) your children ages 18 to 25 who can show us a CURRENT STUDENT ID.

Guest Name: _____ Adult Badge Name: _____

Address: _____ Apt/Unit _____ City _____ State _____ Zip+4 _____

Email: _____ Phone: _____ Cell: _____

Guest Name: _____ Adult Child, Aged _____
 Address: SAME AS ABOVE – Use a separate form for each address. (Badge Name)

Guest Name: _____ Adult Child, Aged _____
 Address: SAME AS ABOVE – Use a separate form for each address. (Badge Name)

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 Address: SAME AS ABOVE – Use a separate form for each address. (Badge Name)

Guest Name: _____ Adult Child, Aged _____
 Address: SAME AS ABOVE – Use a separate form for each address. (Badge Name)

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|---|----------------|--------------------|
| Registration amount is for one spouse / life partner / significant other. | Quantity | Adult Total |
| Adult guest of program participant @ \$35 each | \$ ') X | \$00 |
| Registrations for your children aged 6 – 12 (no quantity limit) | Quantity | Child Total |
| Age 6 – 12 Child guest(s) of program participant @ \$17 each | \$ % X | \$00 |
| Registrations for your children ages 13 to 18; or for your children aged 18 to 25 who can show current student ID (no quantity limit). | Quantity | Child Total |
| Age 13 – 23 Child guest(s) of program participant @ \$35 each | \$ ') X | \$00 |
| I would liked to order: | Quantity | Order Total |
| Balticon 49 (last year's) 3DVD set, including Masquerade, Special Events and select Film Festival entries \$25 (includes tax & shipping) | \$ 2) X | \$00 |
| Tax deductible donation to BSFS to support Literary Projects | | Donation Total |
| Thank you for your generous donation! | | \$00 |
| | | Grand Total |
| Registrations, Purchases and Donation — Combined Total/Remittance Amount | \$ |00 |

We are not able to process payment for Participant's Guest registrations on-line. Please *do not email* credit card information. Mail two copies of this form and one copy of the payment or credit card info form (the form on page 2) to:

Balticon 50 Guest of Participant Registration
 Attn: Ban Wang, Treasurer
 P.O. Box 686
 Baltimore, MD 21203-0686

DO NOT EMAIL THIS FORM — See Page 2 for payment form and mailing instructions.

Balticon) \$ Registration Form for Guests of Program Participants
DO NOT EMAIL THIS FORM — See Page 1 to enter names, address, etc.

Participant Legal Name: _____ **Badge Name:** _____

Payment Options (Do NOT email personal financial information to us!):

Check or Money Order number _____ (Payable to Balticon.50) MasterCard Visa

Card Number: _____ Exp (Month/Year) | _____

Signature of Cardholder: _____

Cardholder name as it appears on the card: _____

Card Billing Address: _____

City: _____ State/Province _____ Zip+4 _____

Country: _____

We are not able to process payment for Guests of Program Participants on-line. Please *do not email* credit card information. Send **both pages** of this form and your payment or credit card info not later than May 5, 2016, to:

Balticon 50
 Participant Guest Registration
 Attn: Ban Wang, Treasurer
 P.O. Box 686
 Baltimore, MD 21203-0686

Please Note: Children under 6 are free if accompanied by an adult at ALL times.

Register multiple persons on this form if they all have the same address. Use a separate form for each additional address. Please save this form and download a new blank one for additional registrations.

For Artist Alley information and reservations, contact ArtistAlley@Balticon.org

For Art Show Registration, contact ArtShow@Balticon.org

For Children's Program information, contact YoungFans@Balticon.org

For Costuming Workshop information, contact Costuming@Balticon.org

For Fan Table reservations, contact FanTables@Balticon.org

For Film Festival and Filmmaking Program Information, contact Films@Balticon.org

Poetry Contest: See <http://www.bsfs.org/bsfspoetry.htm>

For other information, mark X below:

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|--|---|--|
| <input type="checkbox"/> <input type="checkbox"/> Advertising: Contact me about advertising in Balticon publications | <input type="checkbox"/> <input type="checkbox"/> Sponsorships: How can my company/organization become a Balticon Sponsor? | <input type="checkbox"/> <input type="checkbox"/> I want to host an open or private party in my room at Balticon. |
| <input type="checkbox"/> <input type="checkbox"/> BSFS Books for Kids: I have cash or items to donate to BSFS BFK. | <input type="checkbox"/> <input type="checkbox"/> Accessibility: Please contact me about special needs support. | <input type="checkbox"/> <input type="checkbox"/> Program Participation: I'd like to recommend someone I think would make a good panelist or presenter. |
| <input type="checkbox"/> <input type="checkbox"/> Open Staff Positions: I would like to commit to a year round position. | <input type="checkbox"/> <input type="checkbox"/> Poetry Workshop: Contact Poetry@Balticon.org to register | <input type="checkbox"/> <input type="checkbox"/> Writer's Workshop: Write to writersworkshop@bsfs.org to register |
| <input type="checkbox"/> <input type="checkbox"/> Other _____ <input type="checkbox"/> <input type="checkbox"/> | | |