

Registration Form

Name:	
Address:	
City, State:	ZIP/Postal Code:
Telephone:	

Email:

Membership Rates					
	Adult	Age 12-18	Under 12		
Through December 31, 2015	\$45	\$35	Free		
Through March 15, 2016	\$50	\$40	Free		
Through November 15, 2016	\$55	\$45	Free		
At door	\$60	\$45	Free		

Name*	Membership Type Co		Total

* "guest" is ok if name is not known

Total Charged: \$_____

Payment Method:

- _____ Square (Visa, AmEx, MC, Disc)
- _____ Paypal
- Cash
 - **Check** Please make checks payable to: Thanksgiving Science Fiction Society.

By submitting this form I agree that I have read and accept the Chessiecon 2015 Code of Conduct at http://chessiecon.org/code.html

Signature: _____