

## MEMBER REGISTRATION FORM

Name(s): \* \_\_\_\_\_

\_\_\_\_\_

*\*Please list your names as you want them to appear on your name tags*

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Tables are being assigned according to the date of registration. To date, we have nearly 400 registrants! Unfortunately, not everyone will have a front row seat, but all seats will be good.

List here the names of persons with whom you would like to be seated, and we will make every effort to accommodate your request.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NOTE:** If you require Vegetarian meals, please check here ☐

**REMEMBER: Hotel Reservations must be made separately – no later than July 25!**

### OPTIONAL PITTSBURGH BUS TOUR:

**Friday, August 25**—We are almost at full capacity on our tour buses, but we are still accepting reservations.

To reserve your seat(s), please include an additional \$34/person with your registration fee.

**Convention Registrations are being accepted until August 15. The fee is \$170.00 per person.**

Cancellation Policy: Refunds can be made in full prior to July 15, 2006; between July 15 and August 15, a \$25 per person processing fee will be charged. After August 15, no refunds will be made.

We encourage payment of registration fee by check, to eliminate processing fees of credit cards; however, we will accept payment by credit card, if that is preferred.

### Registration:

\_\_\_\_\_ people @ \$170.00 each = \$ \_\_\_\_\_

### Bus Tour:

\_\_\_\_\_ people @ \$34.00 each = \$ \_\_\_\_\_

TOTAL..... \$ \_\_\_\_\_

**NOTE:** Saturday night concert only tickets are available at \$40 each, theater style seating behind the dinner tables. Send your check with a stamped self-addressed envelope to address below.

Mail this completed Member Registration Form with check or credit card information to:

Dot Lydic  
201 Park Place  
Pittsburgh, PA 15237

### Payment by Check

Please make checks payable to:  
**FFS Convention 2006**

### Payment by Credit Card

Visa \_\_\_\_\_ MC \_\_\_\_\_ AmEx \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Print name as it appears on card

\_\_\_\_\_  
Cardholder's address