

2019 REGISTRATION



PLEASE PRINT CLEARLY!

Last name: _____ First Name: _____

Spouse (first and last name, only if attending): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

Check here if you're NOT on our mailing list, but want to be.

ADDITIONAL NAMES BEING REGISTERED:

First & Last name(s) of children (24 mos-11 yrs), teens (12-18 yrs), and young adults (18+ yrs):

Name _____ Age: _____

Name _____ Age: _____

Non-homeschooling grandparent / adult caregiver for your children while at convention - FREE, with an accompanying paid adult registration. Please include first & last name(s) here:

Name _____ Name _____

If you have more child, grandparent, or caregiver entries, check here and list names and ages (of children) on back of this form.

REGISTRATION FEES:

Couple (Husband & Wife):	Two days	\$70.00 =	\$ _____
	One day	\$60.00 =	\$ _____
Individual Adult:	Two days	\$65.00 =	\$ _____
	One day	\$55.00 =	\$ _____

Teens (ages 12-18) and young adults - with accompanying paid adult: _____ x \$10 = \$ _____

Children 1st Floor access only wristband (ages 5-11, max \$15/fam): _____ x \$5 = \$ _____

Children ages 2-4, attending workshops with parents: _____ x \$5 = \$ _____

(Children under 24 months are free and will get neither wristband nor name badge.)

Exhibit Hall ONLY Pass (ONE day only) - Wristbands only, NO name badges

Individual	\$30.00 =	\$ _____
Husband & wife	\$35.00 =	\$ _____
Other household members _____	x \$5.00 =	\$ _____

Yes, I would like to make a donation to MassHOPE. _____ = \$ _____

TOTAL AMOUNT DUE \$ _____

PAYMENT METHODS ACCEPTED:

CASH, CHECK or MONEY ORDER (payable to MassHOPE), VISA/MasterCard ONLY

For Registration Use Only:

Registrar's initials: _____

Payment: Cash \$ _____

Check \$ _____ Check # _____ (payable to MassHOPE)

MC/V \$ _____ Authorization # _____

Notes: