

36th ANNUAL PAN PAGAN FESTIVAL



Registration Form



NAME: _____ TELE: (____) _____
 ADDRESS: _____ TRADITION: _____
 CITY: _____ STATE: _____ ZIP: _____
 SIGNED: _____ EMAIL: _____

Read & Accepted Liability Waiver

IF MORE THAN 3 ADULTS ARE REGISTERING, PLEASE XEROX THIS FORM AS ALL ADULTS MUST SIGN IT

NAME: _____ NAME: _____
 ADDRESS: _____ ADDRESS: _____
 SIGNED: _____ SIGNED: _____

Read & Accepted Liability Waiver

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	PRE-REGS.	ON-SITE	SAT-Day***	NO.	AMOUNT
ADULTS: 14 years & older:	\$70.00*	\$85.00*	\$40.00	_____	\$ _____
CHILDREN: 5-13 years old:	\$20.00	\$27.50	\$15.00	_____	\$ _____
CHILDREN: Under 5 years Old:	FREE	FREE	FREE	_____	FREE
BASIC FAMILY RATE:	\$160.00**	\$195.00**	N/A	_____	\$ _____
Additional Children 14 & Older At \$15.00 Each:	---	---	N/A	_____	\$ _____
ELECTRIC HOOK-UP ****	\$20.00	\$25.00	N/A	_____	\$ _____

* After adults complete their MANDATORY 2 hours of service they can get a \$10 rebate on their registration fee.
 **On FamPlan only ONE adult is required to do service & there is ONLY ONE rebate per FamPlan.
 *** Sat. Day Rates Effective AFTER 10am. ****Electric Hook-Ups are limited & on a First Reg./First Get Basis.

Liability Waiver: By signing this form the named individuals shown understand that while all reasonable precautions are taken, it is possible to be injured in a number of ways at this gathering and they agree to defend, indemnify and hold harmless the Midwest Pagan Council, Inc., it's subsidiaries, affiliates, officers, employees, suppliers and agents from any and all claims or demands including, but not limited to attorney's fees made by any third party due to or arising out of attendance at and/or participation in this event. **NOTE:** Forms missing signatures WILL be returned. **NOTE:** All people camping with you MUST be registered for the Fest or they will have to leave the campground.

PRE-REGISTRATON RATE T-SHIRTS: (PLEASE INDICATE SIZE)	NO.	AMOUNT
SM, MED, L, XL - 1 Per Adult Pre-Registered @ \$ 10.00 each:	_____	\$ _____
XXL or XXXL - 1 Per Adult Pre-Registered @ \$ 11.50 each:	_____	\$ _____
CHILDREN'S SM, MED, L - 1 Per Child Pre-Registered @ \$ 9.75 each:	_____	\$ _____

(NOTE: If we get orders for a total of less than 20 "T's", they will not be available.)

TOTAL REGISTERING // TOTAL AMOUNT ENCLOSED: _____ \$ _____

!!! ADDITIONAL INFORMATION THAT WE NEED !!!

Number of Vegetarians Registering: _____ (Need to Know for Saturday's Feast)
 I/WE Will Do Service At: REGISTRATION:____ SECURITY____ FIRST AID (Need Credentials):____
 GO-FER:____ SAT. FEAST: PREP.:____ SERVING:____ CLEAN-UP:____ SITE CLEANUP:____
 HOW DID YOU LEARN OF OUR FEST??? _____

Make Check/Money Order (U.S. Funds) Payable To & Mail To:

Midwest Pagan Council
 P. O. Box 160 Western Springs, IL 60558-0160
 Questions? Call (708) 795-9660 BEFORE 8/1/12 (NO Collect Calls!)

MPC Use Only

Date In: _____
Initials: _____
Cash: _____ or Ck# _____
No. of Vouchers: _____