

Balticon 48 Registration Form - Mail-in Registration deadline is May 1, 2014.

Name: _____ Adult Child (circle one)

Badge Name: _____

Name: _____ Adult Child (circle one)

Badge Name: _____

Name: _____ Adult Child (circle one)

Badge Name: _____

Name: _____ Adult Child (circle one)

Badge Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ Country: _____

E-mail: _____ Phone: () _____

(Please copy this page for additional registrations, one address per form please)

If postmarked by:	02/28/14	04/15/14	After 4/15/14	At door	Quantity	Total
Adult (13+)	\$55	\$60	\$65	\$TBD	x _____	\$ _____
Child (age 6-12)	\$27	\$30	\$33	\$TBD	x _____	\$ _____

Balticon 47 (2013) DVD set, including: Masquerade, Special Events and select

Film Festival entries \$30 (includes tax & shipping) x _____ \$ _____

Tax deductible donation to BSFS to support Literary Projects ----> \$ _____

Total \$ _____

Payment Options:

Check or Money Order payable to Balticon 48 MasterCard Visa

Card Number: _____ Expiration (Month/Year) _____

Signature of Cardholder: x _____

Cardholder name as it appears on the card: _____

Card Billing Address: _____

City: _____ State: _____ ZIP: _____ Country: _____

Send this form and payment to:

Balticon 48 Registration
P.O. Box 686
Baltimore, MD 21203-0686

If you are interested in additional information on any of the following departments or activities at Balticon:

Handicapped Access; Open Staff/Volunteer Positions; Artist Alley; BSFS Books for Kids; Fan Tables; Becoming a Balticon Sponsor; Party Registration; Artist Registration; Masquerade; Poetry Track/Workshop; Advertising in the BSFan; Young Writers Contest; Writers Workshop; Film Festival; Costuming Track/Workshops; Becoming a Program Participant; Amateur Writers Contest.

Please see the pages that follow.

On the following pages you will find all the departments and activities mentioned above. Please fill in your contact information for each department and or activity you are interested in, please **cut that slip of paper out** and include along with your completed registration form. Your contact information will be forwarded to the staff of that department or activity.

If you are not interested in any additional information, just print the first page of this form and return the completed form to the mailing address provided.

If you are interested in launching your new book, new music offering, new podcast, new play or new film at Balticon 48, please contact Program@Balticon.org before January 15, 2014, to discuss options and opportunities.

----- CUT HERE -----

Please send me information on the BSFS Amateur Writing Contest.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I am interested in information on Handicapped access at Balticon.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I want to help! Tell me about Volunteering/Staff Positions for Balticon.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I would like to have a table on Artist Alley at Balticon. Please tell me how to arrange that.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I have items to donate for the BSFS Books for Kids program.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

My organization would like a Fan Table at Balticon. How do we arrange that?
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Send me information on being a Balticon Sponsor.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

What do I need to do to have a Party at Balticon? Please send me information.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

Please send information about Artist Registration for the Balticon Art Show.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I am interested in information on the Masquerade and or the Costuming Track at Balticon.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I am interested in information on the Poetry Workshop at Balticon.

My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Please send me information on advertising in the BSFan (the Balticon collectible magazine).
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

Please send me information on Young Writer's Contest at Balticon.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

Please send me information on Writer's Workshop at Balticon.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I have a film I want to submit for Film Festival. Send me information on submitting
at Balticon. My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

----- CUT HERE -----

I am interested in information on being a Program Participant at Balticon.
My contact information is:

Name: _____

Address: _____

City/State/Zip: _____

Email: _____