

**Registration Form, KOS Fall Meeting,  
October 4 - 6, 2019  
Wichita, Kansas**

I (we) plan to attend the 2019 KOS Fall Meeting

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

	<u>Number</u>	<u>Total</u>
Registration Fee \$20/person	_____	\$ _____
Saturday Banquet \$22/person (Must be registered by September 20!)	_____	\$ _____
Sunday breakfast \$10/person	_____	\$ _____
Surcharge for payment received after September 25 <sup>th</sup> \$10/person	_____	\$ _____
Total Amount Due (Checks payable to KOS) Or pay online via PayPal -		\$ _____

Number of persons in party: \_\_\_\_\_

Special needs or requests: \_\_\_\_\_

Registrations received after September 25<sup>th</sup> will have a surcharge of \$10.00 per person.

No Cancellation Refunds after September 27<sup>th</sup>.

Please mail/email completed registration with full payment (even if paying online) to:

Max Thompson  
1729 E. 11th Ave.  
Winfield, KS 67156

e-mail: [maxt@cox.net](mailto:maxt@cox.net)

In submitting this registration form I (we) understand that KOS is not responsible or liable for any accidents or injury that might be associated with the 2019 KOS spring meeting. (Registering on line, or submission of this form electronically indicates your acceptance of these conditions.)

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