

Registration Form, KOS Spring Meeting, May 5 – 7, 2017 Pittsburg & Galena, Kansas

I (we) plan to attend the 2017 KOS spring meeting

Name(s) _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

		<u>Number</u>	<u>Total</u>
Registration Fee	\$15/person	_____	\$ _____
Sunday lunch (sandwiches)	\$11/person	_____	\$ _____
Surcharge for payment received after April 20 th	\$10/person	_____	\$ _____
Total Amount Due (Checks payable to KOS)			\$ _____

Number of persons in party: _____

Special needs or requests: _____

Registrations received after April 20th will have a surcharge of \$10.00 per person.

Please mail completed registration with full payment to:

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

e-mail: 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 2017 KOS spring meeting. *(Registering on line, or submission of this form electronically indicates your acceptance of these conditions.)*

Signatures

Date