

Registration Form, KOS Fall Meeting

September 26 - 28, 2025

Pittsburg, Kansas

I (we) plan to attend the 2025 KOS Fall Meeting

Name(s) _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

	Number	Total
Registration Fee \$15/person	_____	\$ _____

Student Registration	_____	\$ <u>0.00</u>
<u>(No charge for students but you still need to register)</u>		

Saturday Banquet, \$20/person	_____	\$ _____
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To be certain to have a meal, you must be registered by September 18!

Surcharge for payment received after Sep 18 th \$10/person	_____	\$ _____
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Total Amount Due (Checks payable to KOS)	_____	\$ _____
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[Or pay online via PayPal -](#)

Number of persons in party: _____

Special needs or requests: _____

Registrations received after September 18th will have a surcharge of \$10.00 per person.

No Cancellation Refunds after September 20th.

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

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 2025 KOS fall meeting. (Registering on line, or submission of this form electronically indicates your acceptance of these conditions.)

Signatures Date