

**Please Print!**

1. Name: \_\_\_\_\_

Badge Name (Optional): \_\_\_\_\_

Address: \_\_\_\_\_ # \_\_\_\_\_

City: \_\_\_\_\_

Prov / State: \_\_\_\_\_ Code / Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

- Full membership, until April 20 40\$
- Full Membership, April 21 to Sept. 15 45\$
- \*Friend of Con\*Cept 60\$

NB: Please fill out a form for **each adult** registrant. Children will be registered at the door.

\* Register as a **Friend of Con\*Cept** and you will receive a thank-you gift at the door, and have a seat in the first rows of the main hall reserved for you. **Register as a Friend of Con\*Cept before Sept 1, and see your name in our souvenir book!**

**Payment**

Cheque **OR**  PayPal

Make cheque payable to **Con-Cept SFF**, and mail to:

Con-Cept SFF  
CP 196  
Ste-Julie, QC  
J3E 1H6

Use the link to PayPal from our website

**Kindly add \$1.50 for each registration to cover PayPal's transaction fees.**

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