Autreat 2009 registration form

(Please list names of all family members who will attend, and ages of any children under 18)

Name	Age	Days attending	Fee category	Special requests	
	(if under 18)	(specify which day(s), or write "All")	(A-H)	(Days only, no meals, camping etc.	
Address					
City	State or Province	Zip or posta	al code	Country	
Phone (day)		Phone (ever	Phone (evening)		
Email					
ANI member household? (If one person in the house rate.)	•	o ember, then everyone in the	household is e	ligible for the ANI member	
		es, Canada, or Mexico)			
Optional additional dona (This will be used for sch		at program enhancement.)			
Total enclosed:					
If alternate materials format is needed, please indicate: Braille Large Print Tape Disk					
If accessible lodging is needed, please indicate:					

Any other accessibility needs: