

STOMPEDEPASS AND HOST SPONSOR REGISTRATION FORM Please print clearly!

Name:	
Street:	
City•St•Zip•Country:	
Phone:	E-mail:
Name for badge:	
Club/group affiliation:	
Emergency contact (nam	e/phone):
Registration fee (check c	one):
StompedePass	□ \$129 (postmarked by July 31, 2017)
	\$139 (postmarked by September 30, 2017)
Host Sponsor	□ \$179 (postmarked by July 31, 2017)
	□ \$189 (postmarked by September 30, 2017)
	List me in the program as
Sunday brunch – add	\$20 (inclusive of tax and service)
□ T-shirt – add \$12 (com Indicate size: □	
	member – subtract \$10 (Membership must be active Oct. 19, 2017)
	n additional tax-deductible donation of \$
	······································
Total amount: \$	
Method of payment:	
Check (payable to The	e Sundance Association)
□ Visa □ MasterC	ard Discover
Acct no:	Exp. date:
Name on card:	
Billing address:	
Signature:	Date:
Send form with payment	to: The Sundance Stompede 2261 Market St., PMB 225 San Francisco, CA 94114