

International Obsidian Conference 2016 Registration Form

Please complete this form and return by e-mail to rtykot@usf.edu.

Title: First Name: Last Name:

Student? (Y/N) Level:

* To qualify for student rate, please e-mail student documentation to rtykot@usf.edu

University/Affiliation: Department:

Street Address:

City: State/Province: Zip/Postal Code:

Country:

Phone Number: E-mail:

Emergency Contact Name:

Emergency Contact Phone Number:

Payment Method

Check (U.S. dollars)

Payment Amount

Day Sent

Credit Card (using PayPal)

Payment Amount

Bank Transfer

Payment Amount

Bank Name

Day and Time Sent

Will payments be made in your name? (Y/N) If not, name of payer?