"Decade of Dreams" ★ 10th Annual Gene Convention ★ Nov. 11-13, 2005 ★ Stamford, CT

Registration form

Name(s): _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Phone - day: _____ Country (if not U.S.): _____

Phone - evening: _____ E-mail: _____

✩ *All packets and convention information will be sent via e-mail unless requested otherwise.* ✩

Which past Gene Conventions have you attended?

❑ 1996 ❑ 1997 ❑ 1998 ❑ 1999 ❑ 2000 ❑ 2001 ❑ 2002 ❑ 2003 ❑ 2004

Would you like to serve as a table hostess? ❑ Yes ❑ No

Will you be renting a sales table? ❑ Yes ❑ No Will you be selling from your room? ❑ Yes ❑ No

Please make your selection(s) below:		**Qty.**	**Total**
Registration(s) @ $405	*Note: Deduct $15 per registration if paid in full by cash, check, or money order before September 1.*	_____	$_____
Absentee(s) @ $435		_____	$_____
Companion(s) @ $225		_____	$_____

Please provide the name(s) of your companion(s):

_____

Individual breakfast(s) @ $35	_____	$_____
Individual lunch(es) @ $60	_____	$_____
Individual dinner(s) @ $85	_____	$_____
Radio City Christmas Spectacular @ $115	_____	$_____
Madame Alexander factory tour(s) @ TBD	_____	

(You will receive an invoice for this when the price is established.)

Total due: $_____

✩ *Cancellation fee is $25 before August 10; no refunds after that date.* ✩

❑ Check ❑ Money order ❑ AMEX ❑ Discover ❑ MasterCard ❑ VISA

Card number: _____ CVC2/CVV2*: _____ Exp. date: _____

Signature: _____

**This is the 3-digit number that appears on the far right of the signature panel on the back of your card.*

Note: The charge on your card will appear from "Bell Enterprises."

Please return your registration form by mail to: Sandra Stillwell
8305 Blue Lick Rd
Louisville, KY 40219

Or by fax to: 703-310-6224

Visit the official Gene Convention Website at bellenterprises.com/gene