

# Warpstock 2016 – Orlando, Florida

## Daily Registration Form

Country Inn and Suites Orlando Airport

November 4 - 6, 2016

To register for Warpstock 2016, fill out the form and send it together with a check or money order made out to "Warpstock Corporation" or credit card information to the following address:

**Warpstock Corporation**  
**7 Loudoun Street, SE, Suite 2B**  
**Leesburg, VA, USA 20175-3012**

**Fax Number: 1-419-831-9257**

- Please include one registration form for each attendee.
- Please note that all mail-in or fax registrations must be received by Warpstock Corporation on or before October 15, 2016.
- Warpstock will accept on-site registrations for the 2016 event.

This registration covers only the admission to classes and sessions during Warpstock 2016.

### Hotel Accommodations

Are you planning to stay at the Country Inn and Suites Orlando Airport?  Yes  No.

If you answered Yes, then you will need to make arrangements with the hotel for accommodation before October 28, 2016 in order to qualify for the special Warpstock rate. You can make hotel reservations by telephone at **1-800-456-4000**. State that you are attending Warpstock 2016 when booking room.

Until July 1, 2016, you may choose the Early Bird Registration 1. Between July 1 and August 31, 2016 choose Early Bird Registration 2. After September 1, 2016 only the Full Registration will be accepted. Select only one choice. Please circle choice of day below.

Circle Choice	Description	Unit Price	Total
<b>FCR</b>	<b>Daily Conference Registration – for Friday, Saturday, or Sunday</b> - Includes admission to all classes and sessions.	<b>\$99.00</b>	
<b>EBD1</b>	<b>Early Bird Discount 1 – for Friday, Saturday, or Sunday</b> - Register on or before <b>June 30, 2016</b> to receive an Early Bird Discount of 33.3%.	<b>\$49.00</b>	
<b>EBD2</b>	<b>Early Bird Discount 2 – for Friday, Saturday, or Sunday</b> - Register on or before <b>August 31, 2016</b> to receive an Early Bird Discount of 20%.	<b>\$69.00</b>	

Check or money order enclosed **OR**

Please charge my  Visa  MasterCard  Discover  American Express

Card # \_\_\_\_\_ Exp \_\_\_\_\_ CVV2 \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

NAME : \_\_\_\_\_

E-MAIL : \_\_\_\_\_

STREET ADDRESS : \_\_\_\_\_

CITY : \_\_\_\_\_

STATE OR PROVINCE : \_\_\_\_\_ ZIP/POSTAL CODE : \_\_\_\_\_

COUNTRY : \_\_\_\_\_