

# Warpstock 2019 – Orlando, Florida

## Daily Registration Form

Country Inn and Suites Orlando Airport

November 8 - 10, 2019

To register for Warpstock 2019, 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 September 30, 2019.
- Warpstock will accept on-site registrations for the 2019 event when space is available.

This registration covers only the admission to classes and sessions during Warpstock 2019 and lunch on Friday or Saturday.

### 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 1, 2019 in order to qualify for the special Warpstock rate. You can make hotel reservations by telephone at **1-800-456-4000 or 407-856-8896**. State that you are attending Warpstock 2019 when booking room.

Until May 31, 2019, you may choose the Early Bird Registration. After June 1, 2019 only the Full Registration will be accepted. Select only one choice.

Please select your choice of day to attend.  Friday  Saturday  Sunday (free)

Circle Choice	Description	Unit Price	Total
<b>DCR</b>	<b>Daily Conference Registration – for Friday or Saturday</b> - Includes admission to all classes and sessions, includes lunch.	<b>\$99.00</b> <b>US Dollars</b>	
<b>EBD1</b>	<b>Early Bird Discount 1 – for Friday or Saturday</b> - Register on or before <b>May 31, 2019</b> to receive an Early Bird Discount of \$20.	<b>\$79.00</b> <b>US Dollars</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 : \_\_\_\_\_