

Massachusetts Men's Gathering

MMG 53: September 18 - 20, 2015

Camp Joslin, Charlton, MA

Mail-In Registration Form

Print this form, fill it out, and mail it along with your check to the address below.

Contact Information: Name: _____ Address: _____ City: State: Zip: Phone: (home) (work) (cell) E-mail: Rides and requests (check if applicable): I need a ride to MMG I can take ____ riders to MMG I need ____ more brochures I am a vegetarian. I require financial assistance I am a vegan. for this event Special Needs: In this section, please inform us of any special medical, dietary, or other needs you may have.

Workshop Related (optional section):

I plan to lead a workshop(s) on the following topic(s):

I would like to see a workshop(s) offered on the following topic(s):

Event Cost:

Please note, we have a reduced rate (1/2 price) for **first time** MMG attendees.

| Income Level: | Your fee: | First Time Attendees: |
|---------------------|-----------|--------------------------|
| Under \$10,000 | \$95 | \$47.50 |
| \$10,000 - \$19,999 | \$120 | \$60.00 |
| \$20,000 - \$29,999 | \$140 | \$70.00 |
| \$30,000 - \$49,999 | \$175 | \$87.50 |
| \$50,000 or more | \$215 | \$107.50 |

Payment Information:

My conference fee is \$_____ (fee based on your income. See Event Cost.) *Scholarship fund donation \$_____(optional gift) AMOUNT ENCLOSED \$_____(Please enclose at least half your fee as a deposit. Balance due at event.) Make check payable to: *Massachusetts Men's Gathering*.

Mail check and completed registration form to: Massachusetts Men's Gathering c/o Dennis Donovan 20 Ledyard Road Winchester, MA 01890

Refund Policy:

Your conference fee, less a \$20 handling charge, will be refunded if we receive notice at least 7 days before the event or if a replacement attendee is found. *Your donations make our partial scholarships possible. Don't let money come between you and MMG. Indicate above if you require financial assistance for this event. We will get back to you.

Your Signature:

By my signature on this application, I agree to assume all responsibility for all risk of damage and injury that may occur to me as a participant in this event. I hereby, for myself, my heirs, executors, and administrators, release and discharge Massachusetts Men's Gathering, Inc., The Joslin Camp, and all persons associated with this event from all claims, damages, causes of action, present or future, known or unknown, anticipated or unanticipated, which result from, or arise from, or are incident to my participation in this event.

| Signature: | Date: |
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