

P.O. BOX 66083, AUBURNDALE, MA 02466

2017 Conference Registration (Chicago, Illinois)

Full conference registration, October 12-15 (includes all conference presentations and two provided meals):

	Qty.
SOF members:	
(A member may buy up to two registrations at member price.)):
If postmarked on or before August 31, 2017:	\$200 x =
If postmarked <u>after</u> August 31, 2017:	\$225 x =
Non-members:	
If postmarked on or before August 31, 2017:	\$225 x =
If postmarked <u>after</u> August 31, 2017:	\$250 x =
For those attending only specific conference days:	
Single conference days (specify day(s):)	\$65 x =
Sunday banquet luncheon only:	\$40 x =
	<u>Total</u> : \$
Name	
Address	_
City State Zip	_
Email address Phone number (o	ptional)
Method of Payment: Check (enclose) Credit Ca	ard (give details below)
Name on Credit Card	
Credit Card Number Expiration	n (Mo./Year)
Cardholder's Signature	
To make reservations at the Chicago Marriott Downtown Michigan Avenue), call 877-303-0104 and mention the Sha	_

Fellowship Conference. Online, go to: https://aws.passkey.com/e/49043966

Mail this form with your check or credit card information to: Shakespeare Oxford Fellowship, P.O. Box 66083, Auburndale, MA 02466