



Aurora-Con 2008 Group Registration Form
The Last Frontier for Anime
September 27th-28th, 2008
William A. Egan Civic & Convention Center, Anchorage

Sending in Group Registrations

Complete this form for a group of 8 or more registrations. If sending in more than 8 registrations, please print out more copies of this form and send in together. Children 6 and under cannot be added onto Group Registration. Free registration for children 6 and under is **ONLY** available with Individual Registration**. Please **PRINT** or **TYPE CLEARLY**. By submitting this form, you state that you have read all of the information provided in the registration section of www.auroracon.org and agree to the terms, rules and conditions stated therein.

1. Any changes to be made after you have registered your group, please contact the Registration Coordinator at registration@auroracon.org.
2. Make payment to the order of AuroraCorp
3. Send Payment along with registration to:
 Aurora-Con—Registration
 PO Box 210050
 Anchorage, AK 99521-0050

Notes About Payment

Canadian checks will **NOT** be accepted. Please submit only Domestic US Checks/Money Orders or International Money Orders. There will a \$20.00 return check charge (US Funds) on any check that does not clear.

UNDER AGE 12?

If you are under 12 years of age your parent of guardian **MUST** complete the Parental Consent section of the Registration Form. Due to some of the content presented at this convention, **ALL** minors must be accompanied by an adult who is attending Aurora-Con. Sorry, **NO EXEPTIONS** will be made.

Name of Group or Club (if applicable): _____
Name of Group's Coordinator Contact Information: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
E-mail: _____ **Phone:** _____

Enclosed is \$ for Aurora-Con 2008 registrations.

* Group Rates (a minimum of 8 registrants required for group rates) - \$10 each person. ** Children 6 and under cannot be added onto Group Registration.

Name Person #1:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

Parental Consent

This section is requires for anyone under 12 years of age attending Aurora-Con 2008.

I give my authorization for the above-named child to attend the Aurora-Con 2008 convention. I understand that my child will not be monitored nor supervised during this convention, and agree to hold Aurora-Con, AuroraCorp, its Board of Directors and its staff harmless of any wrong doing. I further accept financial responsibility for any damages caused by my child during his/her stay at the Convention's venue for purposes of this convention.

Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

PRINT and include the above information for EACH registration.

Name Person #2:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #3:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

Parental Consent

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #4:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #5:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #6:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #7:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Name Person #8:	
Birth Date:	
Email:	
Address:	
City, State/Province, Zip:	

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Parent/Guardian Name:	
Parent/Guardian Signature & Date:	

Total amount enclosed (for entire group): _____
(U.S. dollars only)

Make check payable to "**AuroraCorp**" *NOT* "Aurora-Con".
 Please do not staple your check or money order to this form.
 Mail your check or U.S. Postal money order to:

Aurora-Con — Registration
P. O. Box 210050
Anchorage, AK 99521-0050