

Wildacres Regional Foray
October 7-10, 2010
Wildacres, North Carolina

To register, complete this form and mail with a check, payable to NAMA, for \$215 per person to:

Glenda O'Neal
1038 Wateree Street
Kingsport, Tennessee 37660

Info: gkoneal_mrshe@yahoo.com (underscore after gkoneal)
Phone: (423) 246-1882

Persons sharing a room may use the same form.

Name _____	Name _____
Male _____ Female _____	Male _____ Female _____
Address _____ _____	Address _____ _____
Phone _____	Phone _____
Email _____	Email _____

Dietary Requests _____	Dietary Requests _____
Bedding Preference: Double____ Single____	Bedding Preference: Double____ Single ____

I wish to room with _____.

Participants in this foray will be limited to 40 persons, double occupancy. There are no private rooms.

The cost of the foray covers 3 nights lodging and 8 meals beginning with an evening meal on Thursday October 7th and ending with breakfast on Sunday October 10th.

Liability waiver:

By signing below I release the North American Mycological Association, its officers, and members from any and all liability and loss arising from any accident, injury, or illness which may result from activities of the NAMA regional foray at Wildacres.

Signature #1: _____ Date: _____

Signature #2: _____ Date: _____