

payer name:	phone:	emai	l:
MEMBER NAME	BADGE NAME (IF DIFFERENT)	MEMBERSHIP TYPE	EMAIL / AGE OF CHILD
		□Adult □YA □Child □KidinTow	
		□Adult □YA □Child □KidinTow	
		□Adult □YA □Child □KidinTow	
		□Adult □YA □Child □KidinTow	
		□Adult □YA □Child □KidinTow	
		□Adult □YA □Child □KidinTow	

Children who stay in the company of their parent during the convention are considered as "Kids-in-Tow" and are admitted at no charge.

Children who attend program items without their parents need a Boskone membership. Send registration questions via email to registration@boskone.org

street address:

ALL MEMBERS LISTED ON THIS FORM MUST RESIDE AT THIS ADDRESS

PLEASE SEND ME INFORMATION ABOUT:

volunteering to help!

□ handicapped services

entering original/resale work in the Art Show

☐ selling items in the Dealers' room

☐ joining NESFA

IF YOU ARE NOT BUYING AT BOSKONE:

If mailing in this form, pay by check or money order only. To pay by credit card or PayPal, register at www.boskone.org

Mail this form to: Boskone PO Box 809 Framingham, MA 01701 USA

city:	state: zip/postal code:	
country:	phone:	_

	TOTAL PAYMENT (check/money order payable to BOSKONE)			s
4902	Kid-in-Tow Membership		\$0	
4904	Child [5–17] Membership		\$20	S
4903	Young Adult [18–25] Membership		\$30	S
4901	Adult (26+) Membership		S50	\$
PLU	MEMBERSHIP TYPE - FULL WEEKEND ONLY	QTY	COST/MEMBERSHIP	TOTAL COST/LINE