

**LACON IV – 64<sup>th</sup> World Science Fiction Convention**  
**23 August – 27 August 2006**

Please fill in legibly **ALL** the information requested on this form and **MAIL** it along with your table deposit fees (in US dollars, by check or credit card) to:

**LACON IV**  
**PO Box 8442**  
**Van Nuys, CA 91409**

Business Name: \_\_\_\_\_

Contact person's name: \_\_\_\_\_

LACON IV membership number: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Post Code: \_\_\_\_\_

Country: \_\_\_\_\_ CA Sales Tax License Number: \_\_\_\_\_

Email: \_\_\_\_\_

URL: \_\_\_\_\_

I want my email address and URL to be posted on the LACON IV Web site: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

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Types of merchandise sold:   \_\_\_Books  \_\_\_Art  \_\_\_Games  \_\_\_Video  \_\_\_Audio  
                                   \_\_\_Jewelry  \_\_\_Magazines/Fanzines  \_\_\_Buttons  
                                   \_\_\_Media related  \_\_\_Clothing  \_\_\_Comics  
                                   \_\_\_New Age  \_\_\_Other: \_\_\_\_\_

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Number of tables requested (limit of 5 per dealing entity) \_\_\_\_\_

Each table is USD100 deposit. Please send checks made out to LACON IV.

Credit card deposits only:       Name on card: \_\_\_\_\_  
   Number on card: \_\_\_\_\_  
   Expiration date on card: \_\_\_\_\_

I authorize LACON IV to charge \$\_\_\_\_\_ on my card.

Signature to match name on card: \_\_\_\_\_  
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Would consider a booth at a MINIMUM fee of USD500 per booth:   \_\_\_\_\_

Will need electrical power at an additional fee:                        \_\_\_\_\_

Will need a phone line at an additional fee:                                \_\_\_\_\_

Will need handicapped access (please tell us why):                     \_\_\_\_\_

Will be using a large vehicle and will need special access and parking:   \_\_\_\_\_

Size of vehicle \_\_\_\_\_