



REGISTRATION FORM
OLOC 2017 National Gathering
August 2–6, 2017, Tampa, Florida



STEP 1: Tell us about you. Please *print* exactly as you want to be listed.

Name: _____

Date of Birth: _____ Age as of 8/2/17: _____

Mailing Address: _____

City: _____ State or Province: _____ ZIP or postal: _____

Out of United States? Country: _____

Primary phone #: _____ E-mail: _____

How did you hear about this event? _____

Do you need any specific services to assist with disabilities? If yes, please describe what you would like: _____

Do you plan to attend the session *Lesbians of Color 60 and Older*, on August 2? _____

Emergency contact (in case you become ill or need assistance):

Name: _____ Phone: _____

Food preferences:

Meals with meat ___ fish ___ vegetarian ___ vegan ___

other (describe) _____

Would you like to volunteer to assist during the Gathering? _____

STEP 2: Registration fee covers programs, entertainment, and three lunches. It does not cover housing, transportation, or meals other than Thursday, Friday, and Saturday lunches.

EARLY REGISTRATION FEE IF POSTMARKED BY JUNE 1	\$275.00
REGISTRATION FEE POSTMARKED AFTER JUNE 1	\$300.00
REGISTRATION FEE POSTMARKED AFTER JULY 15	\$325.00

STEP 3: PAYMENT (Use financial assistance form if needed.)

Registration fee (see schedule above)	\$ _____
OLOC Membership \$25–50 (optional, includes newsletters)	\$ _____
Contribution for financial assistance (optional)	\$ _____
TOTAL	\$ _____

Mail a check and this form to OLOC, PO Box 5853, Athens, OH 45701 or use Paypal at www.oloc.org.