CONFUSION 2006 MASQUERADE REGISTRATION FORM

Fill out all section applicable to your costume. Write neatly or type.

To register in advance: Send by email to <u>confusion-masquerade@stilyagi.org</u>
or postal mail to Attn: Masquerade, Confusion, PO Box 8284, And Arbor, MI

[Masquerade use only]

46107. On-site registration closes at 5pm	Saturday of the convention.		
STREAM	CATEGORY		DIVISION
Re-creation	Science Fiction	Junior (ac	lult-made) 🗆
Original	Fantasy		nior madé) □
Ü	Historical	Novice	, \square
WORKMANSHIP JUDGING	Horror	Journeym	an 🗆
Yes □	Humor	Artisan	
No 🗆	Other	Master	
_	_		
TITLE OF COSTUME DESIGNERS/CREATORS			
PRESENTERS/MODELS			
SOURCE OF COSTUME			
Mark all that apply: Written Intro for MC (see attached)	□ Cassette □	Other □ (Specify)
Release I/we have read the rules of this masquerade and agree to abide by them. I/we understand photographs taken of during the masquerade may be used in promotions, publications, internet web pages and other media related to ConFusion. I/we agree to hold the convention, its organizers and the facility both severally and individually blameless for any accident and or injury suffered by me/us during the course of this masquerade except in the case of gross negligence on the part of those cited above. Signed:			
[full legal signature required. If group all must sign. If minor parent or guardian must sign]			
Address:	Ple		ddress or phone number so we may contact ure wrt certificates, ribbons or other details
Primary Contact (if group):			

If you wish the MC to read an introduction for your entry, please print or type your introduction in the space below:			

Any questions about the Masquerade or the Masquerade rules should be directed to the Masquerade Director at confusion-masquerade@stilyagi.org.