

AMQ – NEMF – 2006
ANNUAL NEMF SAMUEL RISTICH FORAY
Saint Anthony's Hermitage, Lac-Bouchette, Québec, Canada
Friday 1st September to Monday 4th September 2006

Registration Form – USA residents

Registration deadline: August 1st 2006
Refund if cancelled before August 15: 80%.

Last name: _____ First name(s): _____

Last name: _____ First name: _____

Children (under 12), First names: _____

Address: _____

City: _____ State: _____ Zipcode: _____

Phone: _____ Club: _____

Email: _____

Do you need a roommate? Male/ Female? we assign

Registration Fees in US \$		Per person	Number of people	Total
Complete package Fri-Mon	Single occupancy	\$385		\$
	Double occupancy	\$300		\$
	Triple or quadruple occupancy	\$275		\$
	Child (in parent's room, your sleeping bag)	\$100		\$
Activities and meals only (Fri – Mon)		\$170		\$
Emplacement for a mobile home (Fri - Mon)		\$75		\$
Registration after August 1 st , additional		\$35		\$

TOTAL on enclosed check: US \$ _____

Make check payable to:
Cercle des Mycologues de Montréal
 Send to:
Cercle des Mycologues de Montréal
Jardin botanique de Montréal
4101, rue Sherbrooke Est
Montréal (Québec) Canada
H1X 2B2

More information at:
www.mycomontreal.qc.ca
 and
www.nemf.org/

By signing this document, I agree to hold harmless the CMM, the SMA and the NEMF, its administrators, officers and members in regard to any civil liability and/or any damage linked to any accident, injury, loss or sickness that could result from any activity or directions of the CMM, the SMA or the NEMF. I acknowledge that consumption of mushrooms may be hazardous to my health and/or the health of my family and I assume the sole responsibility thereof.

Date: _____

Signature(s): _____
