



Mid-Atlantic District

Contest & Convention Registration Form



Name _____ eMail _____

Billing Address _____

City _____ State _____ ZIP _____ Phone _____

Quartet _____ Chapter _____

- Registrations WILL NOT BE MAILED!
- Pick up at the Registration Desk at the Convention
- NO COD or phone orders accepted!
- Payment for the full amount MUST accompany this request.
- EARLY BIRD DISCOUNT of \$5 expires **30 days** prior to each contest.
- Order on-line and pick your seats!

ORDER REGISTRATIONS:

On-line:
MidAtlanticDistrict.com/Registrations

Mail: M-AD Registrations
 9013 Hedgerow Way
 Baltimore, MD 21236-1919

NO PHONE OR COD ORDERS!

DIVISION CONTESTS: \$37 Early Bird / \$42 30 days and less prior to contest QUAN \$ AMT

Spring International Prelim – April 24 & 25, 2020 Miller Hall, Allentown, PA _____ \$ _____

Northern Division Convention – April 24 & 25, 2020 Miller Hall, Allentown, PA _____ \$ _____

Southern Division Convention – June 5 & 6, 2020 Crowne Plaza, Baltimore, MD _____ \$ _____

Central Division Convention – April 17 & 18, 2020 Crowne Plaza, Cherry Hill, NJ _____ \$ _____

Single Event tickets available at the door

FALL DISTRICT CONVENTION: October 23 & 24, 2020

Marriott Lancaster Convention Center, Lancaster, PA

Premium Seats - **\$47** (Before Sep 23) **\$52** _____ \$ _____

Regular Seats - **\$37** (Before Sep 23) **\$42** _____ \$ _____

Single Event tickets available at the door - \$25 each session **TOTAL AMOUNT DUE** \$ _____

[* Early Bird Discounts expire 30 days prior to each contest. FULL AMOUNT of registrations MUST accompany order and be postmarked prior to date to earn discount. List special requests on back of form.]

Cut off date for mail orders is 14 days, on-line 7 days, prior to each contest. After that, purchase on-site.

PAYMENT INFORMATION:

Check # _____ (Make payable to MID-ATLANTIC DISTRICT) Total _____

Credit Card: We accept  [Card holders name and address must appear at top]

Number: _____ - _____ - _____ - _____ Exp Date: ____ / ____ Security Code: _____

I authorize the Mid-Atlantic District to charge my credit card with amount indicated above: _____

Cardholder Signature