

White Sands Star Party XI
Registration Form
Friday, October 8th and Saturday, October 9th 2010

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Daytime phone _____ E-mail address _____

Vehicle License and State (Include for each vehicle you will bring) _____

Do you plan to camp in the dunes? Yes _____ No _____ (only amateur and professional astronomers and their families may camp in the dunes)

If yes, in what car _____ Tent _____ RV _____ Size _____

Type of viewing equipment you will bring _____

Name of adults registered Name of children ages 7-18 **Children under 7**

Astronomy club affiliation (if any) _____

EARLY REGISTRATION (registrations postmarked before September 23rd 2010)

Individual Adult \$40.00 _____

Couple (2 adults) \$60.00 _____

Children ages 7-18 \$12 per child _____

Children under 7 FREE _____

REGISTRATION: (registrations postmarked September 24, or later)

Individual Adult \$60 _____

Couple (2 adults) \$80 _____

Children ages 7-18 \$15 per child _____

Children under 7 FREE _____

Total amount enclosed (Make checks payable to NMMSH Education Department) _____

TO ENSURE YOU ARE PRE-REGISTERED, WE MUST RECEIVE YOUR FORM BY September 30th 2010
Registration includes entrance to White Sands National Monument for two days, observing sessions, mini-workshops, tickets to the NM Museum of Space History and one IMAX-Dome presentation, and the 10:00 a.m. Saturday Planetarium show.

REFUND POLICY: Refunds will be given only if notification is received on or before September 20th 2010 and must be requested in writing. There will be no refund after this date.

YOU MUST FILL OUT THE LIABILITY RELEASE.

LIABILITY RELEASE:

By my signature below, I hereby affirm that:

I am releasing the New Mexico Museum of Space History, White Sands National Monument and the Alamogordo Astronomy Club (hereinafter referred to as the "Providers") from any and all injuries or damages received or sustained arising out of or occasioned by the acts of the Providers in the execution or performance of the White Sands Star Party.

I further waive any claim that I, my heirs, assigns or personal representatives, may have against the Providers for all accidents, injuries or losses I may incur while participating in the White Sands Star Party.

I agree to indemnify and hold harmless the Providers for any costs incurred (including attorney's fees) in defending any action brought against the Providers as a result of my participation in the White Sands Star Party.

My signature upon this form also indicates agreement and acceptance on behalf of all my minor children (under 18 years of age) under my care in attendance.

Names of children: _____

X Signature of Adult: _____ X Signature of Adult:

Date: _____

Mail this form with payments to: White Sands Star Party C/O New Mexico Museum of Space History Education Department, P.O. Box 5430 Alamogordo, NM 88311-5430 Upon receipt, a confirmation letter will be sent to participants. Please note: all participants must sign the preceding liability release to participate. Questions may be directed to the New Mexico Museum of Space History Education Department at 1-877-333-6589 or 505-437-2840.