

# TWINS DAYS FESTIVAL

# TWINS PRE-REGISTRATION

FOR OFFICE USE ONLY

DATE	REGISTRATION #	REG. FEES (Per set)	AMOUNT RECEIVED	CHECK #
		<b>\$15*</b>		

**Return this form and payment to:**  
 Twins Days Festival Committee, Inc., Dept. R  
 9825 Ravenna Road, Twinsburg, Ohio 44087  
 (330) 425-3652 FAX (330) 425-7280  
 www.twinsdays.org / e-mail: info@twinsdays.org

**ALL TWINS MUST REGISTER. Deadline for pre-registration is July 20th.** All twins must provide proof of birth to register (photo copies of birth certificate, baptism, driver's license or work visa). These documents will be kept on file and will not have to be sent in for future festivals. If you have already provided proof of birth, please disregard. Send copies only. Do not send originals. **REGISTRATION FEE is \$15 PER SET for pre-registration. All fees are non-refundable. Registration on site: \$20.**

## TWIN INFORMATION - PLEASE PRINT CLEARLY.

<b>T W I N  1</b>	LAST NAME		FIRST NAME		MAIDEN NAME		AGE	BIRTHDATE	
	ADDRESS				CITY		STATE	ZIP	
	DAY PHONE ( ) -		E-MAIL ADDRESS (for registration confirmation)			<b>Please check all that apply:</b> <input type="checkbox"/> Male <input type="checkbox"/> Identical <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Female <input type="checkbox"/> Fraternal <input type="checkbox"/> Single <input type="checkbox"/> Widowed			
	<b>PROOF OF BIRTH SENT?:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO								
	LAST NAME		FIRST NAME		MAIDEN NAME		AGE	BIRTHDATE	

<b>T W I N  2</b>	LAST NAME		FIRST NAME		MAIDEN NAME		AGE	BIRTHDATE	
	ADDRESS				CITY		STATE	ZIP	
	DAY PHONE ( ) -		E-MAIL ADDRESS (for registration confirmation)			<b>Please check all that apply:</b> <input type="checkbox"/> Male <input type="checkbox"/> Identical <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Female <input type="checkbox"/> Fraternal <input type="checkbox"/> Single <input type="checkbox"/> Widowed			
	<b>PROOF OF BIRTH SENT?:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO								
	LAST NAME		FIRST NAME		MAIDEN NAME		AGE	BIRTHDATE	

## GROUP PHOTO - Prices include shipping and handling. Photos will be shipped to the address listed below. Twins must be registered to purchase.

SIZE	DAY OF FESTIVAL	QUANTITY	PRICE PER PHOTO <small>(funds in US dollars)</small>	TOTAL
8" X 12"	<input type="checkbox"/> Saturday <input type="checkbox"/> Sunday		\$12.00* <small>(Add \$2.50 if shipping outside the U.S.)</small>	

**SHIP TO:**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## PROGRAM PATRONS are listed in the souvenir program by city and state. Maximum of 44 letters (including spaces) per line at a cost of \$5\* per line. No phone numbers, addresses or advertisements, please. **This form must be received by June 20th at the TDFC office for the patron listing to be included in the program.**

Name(s) 1. \_\_\_\_\_

2. \_\_\_\_\_

## PAYMENT

**MASTERCARD, VISA and DISCOVER** are being accepted for pre-registration, group photo(s) and program patron fees prior to the festival only.

MASTERCARD     VISA     DISCOVER

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

LIST TOTALS BELOW	
<b>REGISTRATION</b>	<b>\$</b>
<b>GROUP PHOTO(S)</b>	<b>\$</b>
<b>PROGRAM PATRON</b>	<b>\$</b>
<b>TOTAL ENCLOSED</b>	<b>\$</b>

**U.S. CURRENCY ONLY**

**\*ALL FEES ARE NON-REFUNDABLE.**