



## 1st Annual 5XcdYffjFYi b]cb. 5dfj`&-ž201+ Registration Form

**Name:**

**Address:**

**City:**  **State:**  **Zip:**

**Phone#:**  **Email:**

**We will send E-Tickets, so please be sure your email address is correct!**  
*(If you don't have an email account, please note that in the email line, and we will hold your tickets at the check-in table)*

Number of adults & children age 11 & over:  @ \$21each = \$

Number of children age 4-10:  @ \$10 each = \$

Number of children under age 3 & under:  @ no charge

Total payment enclosed: \$

Number of dogs attending:  **I Paid by PayPal**  (check here)

*(Dog siblings are also welcome. Please list them too, so that we will have an accurate count of participating dogs.)*

	DOG #1	DOG #2	DOG #3	DOG #4
Current Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
MAGSR Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Please make your check payable to MAGSR and mail it, along with this completed registration form to:

MAGSR  
 ATTN: Adopter's Reunion  
 PO Box 353  
 Mt Airy, MD 21771

*If you paid by PayPal, you may email this completed form to: [adoptersreunion@magsr.org](mailto:adoptersreunion@magsr.org) but be sure to check the "I Paid by PayPal" box above*

**PLEASE REMEMBER: Include your email address above to receive your E-ticket(s)!**  
 (If we can't email you the tickets, we will hold them for you at the check-in table)

**Questions:** [adoptersreunion@magsr.org](mailto:adoptersreunion@magsr.org)

**Thank you . . . we look forward to seeing you!**