AANR 2009 REGISTRATION AND MEAL SIGN UP
OAKLAKE TRAILS NATURIST PARK
AUGUST 10-17, 2009

AANR REGISTRATION is $5/Person/Day OR $10/Person FOR THE ENTIRE WEEK.

$_____x_____DAYS X _____ ADULTS = $_____

NAME AND SIGNATURE FOR ARM BAND. PLEASE INDICATE COLOR
(Green: Pictures Allowed; Yellow: Permission Required; Red: NO pictures)

NAME	SIGNATURE	DATE	COLOR
NAME	SIGNATURE	DATE	COLOR
NAME	SIGNATURE	DATE	COLOR

Please provide emergency contact information during your stay at OLT:

Contact: _____ Telephone: _____

MEALS FOR AUGUST 10-17, 2009

PLEASE INDICATE WHICH MEALS YOU WILL BE EATING WITH OLT DURING THE CONVENTION. LET US KNOW ANY SPECIAL DIETARY NEEDS. WE WILL MAKE EVERY ATTEMPT TO KEEP PRICES REASONABLE. INDICATE DATES, ESPECIALLY IF YOU WILL BE HERE BEFORE OR AFTER THE DATES INDICATED ABOVE.

DATE	MEAL(S)	HOW MANY?