## REGISTRATION FORM FOR THE ECOF

If you wish to register and pay on-line, go to <a href="www.edgarriceburroughs.com">www.edgarriceburroughs.com</a> and click on ECOF Registration at the top on the home page.

If you wish to mail a check, fill out the following form and mail it to Edgar Rice Burroughs, Inc. P.O. Box 570277, Tarzana, California, USA 91357. Make checks payable to Edgar Rice Burroughs, Inc. Please note "ECOF" on your check.

## FOR THE ECOF CONVENTION:

Name for ECOF Badge:			
Street Address:			Apt:
State:	Zip Code: _		Country:
Email address:			
ECOF Registration is \$75	before February 6, 2	012, \$85 after th	nat date.
Number of full registration	memberships	@ \$75 each.	Total:
Number of movie-only me	mberships	_@ \$20 each.	Total:
What date do you plan to a	rrive:		
Thursday, March 1st?	_ Friday, March 2 <sup>nd</sup> ?	Saturd	ay, March 3 <sup>rd</sup> ?
Do you want a table in the There will be two sizes ava The half-size table will cos available.	ailable. The full size	table will cost \$	S20 for the entire event.
Is this the first time you ha	ve attended a Burrou	ighs gathering?	Yes No
FOR THE MOVIE:			
In order to gain entry to the identification paperwork.	•	11 *	
First Name:	M.I	Last Name:	
List the names of any addit	cional attendees that	will be viewing	the movie: