



Mail check or money order (**payable to Linda Flores**) with this registration form to:

**Linda Flores**  
**8235 Agora Parkway**  
**Suite 111, PMB 462**  
**Selma, TX 78154**

**Name**

**Address:**

**City/State/Zip:**

**Phone:**

**Email: *Please print clearly***

**Gender: M\_\_ F\_\_ Hotel \_\_ Dorm\_\_ Commuter\_\_**

**Roommate #1**

**Roommate #2**

Your registration will be verified by email.  
Registration is complete only when paid in full.

Driving directions will be included with confirmation email.