NTSS 2012 REGISTRATION - LANCASTER, PENNSYLVANIA - JUNE 22-24, 2012

(Preregister by June 15 to receive special nametag).

Completion of this form is required for entrance to the show. Information will not be released to other entities. Admission and parking are free. To preregister, send form to ATA, PO Box 8, CARTERVILLE, IL 62918-0008.

Or attach copy to an email to americantopical@msn.com, or fax to 618.985.5100

Name: (ast)	(First) ATA Memb	er? Y/N
# Adults # Children List additional names:			
Address	:City	: State: Zip:	
Email:			
If a topical collector, please list collecting interests:			
Please indicate where you learned about this NTSS show. Check as many as appropriate: Philatelic publication - Please give publication name			
Flyer picked up at a stamp show Name of show			
Media (radio, TV, internet, etc.) - Please indicate which			
☐ ATA Website ☐ ATA Mailing ☐ Postcard from Dealer			
On what days do you plan to attend this show?			
EVENT TICKETS Submit form by May 1, 2012, for prices listed below. If mailed after May 1, add \$5 to the cost for each event. Reservations after June 1 accepted only if space is available.			
Event	Function	Number	Total
#1	Half-day Tour Thursday, June 21, 11:30 am - 6:00 pm	x \$35 =	
#2	President's Reception Friday, June 22, 6:30 - 9:30 pm	x \$30 =	
#3	ATA Awards Banquet Saturday, June 23, 7:00 - 9:30 pm	x \$40 for Stuffed Chicken Breast = x \$40 for Broiled Atlantic Salmon = x \$40 for Roast Sirloin of Beef =	
#4	APS Headquarters Full-day Tour Monday, June 25, 8:00 am to 6:30 pm	 x \$45 including lunch/Pepperoni/Salami = x \$45 including lunch/Turkey Sandwich = x \$45 including lunch/Ham Sandwich = 	
#5	Program Contribution	Donations appreciated and are tax deductible	
	TOTAL Enclosed	Tickets will be included in show registration packet	
Check if registrant requires auxiliary services under the Americans with Disabilities Act METHOD OF PAYMENT: Check payable to ATA (preferred form of payment—saves ATA fees) Sending event ticket payment by PayPal to americantopical@msn.com MasterCard, Visa, or Discover; please complete form below.			
Card Number:// Expiration date:/ CVC (security) code:			

Signature:

Name on card: