

NAME	_
ADDRESS	
PHONE	
EMAIL	
STORYTELLER? YES NO	
NEW TO GSSS? YES NO	
FULL DAY, NHSA MEMBER: # TICKETS X \$2	20.00 EACH = \$
FULL DAY, NON-MEMBER: # TICKETS X \$3	0.00 EACH = \$
FULL DAY, VIP : # TICKETS X \$50.00 EACH	H = \$

Total Number of Tickets

Total amount enclosed \$_____

MAKE CHECK PAYABLE TO "New Hampshire Storytelling Alliance"

Please remit to:

NH Storytelling Alliance, PO Box 202, Franklin, NH 00325

Thank you for supporting the New Hampshire Storytelling Alliance!