

# USSF REGISTRATION FORM For Individuals

Note: You will be issued a receipt for your registration and fees. Please save your receipt as proof of your payment when you arrive at the USSF Registration Table in Detroit, June 22-26, 2010. *Please complete one form per person. Please do not mail cash.*

**Make checks and money orders to: US Social Forum 2010**



**Mail-in registration forms and payments should be sent to:  
USSF-Detroit, PO Box 3551, Highland Park, MI 48203**

Today's Date:	<input type="checkbox"/> Mail-in registration	<input type="checkbox"/> Walk-in Registration
Name (print clearly):		
Address:		City:
State:	Zip:	E-mail:
Phone: (     )		Organization membership (if any):
<p><b>Please select your individual registration rate. Early rates are through May 1, 2010:</b></p> <p><input type="checkbox"/> homeless/youth - \$10 (no late fee)</p> <p><input type="checkbox"/> welfare/unemployed - \$20 (no late fee)</p> <p><input type="checkbox"/> low-income seniors/college students/partially employed/international - \$30 early / \$40 late</p> <p><input type="checkbox"/> lower wage working people - \$50 early / \$60 late</p> <p><input type="checkbox"/> medium wage/blue collar working people - \$75 early / \$95 late</p> <p><input type="checkbox"/> higher wage working people/professionals - \$100 early / \$120 late</p> <p><input type="checkbox"/> Scholarship: I cannot afford even the lowest fee and need scholarship assistance. Please fill out the Scholarship Form or call the USSF office at 1-877-515-USSF.</p>		
<p><b>Helping Hand Fund (optional)</b></p> <p><input type="checkbox"/> I would like to donate to sponsor a low-income person for the USSF. My donation is \$</p>		
<p><b>Total amount paid:</b> \$_____ <input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Cash (walk-in only)</p>		

**For mail-in registration: receipts will be emailed or U.S. mailed within 14 days from the date forms and fees are received. If you have not received a receipt after 15 days, please contact the USSF office at 1-877-515-USSF.**

\_\_\_\_\_  
*For office use only:*

Date Received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Received By: \_\_\_\_\_

Date entered into database: \_\_\_\_\_

Paid date: \_\_\_\_\_

Entered into database by: \_\_\_\_\_