

**LAN Party Underground  
Participant Registration Form**

<b>First and Last Name*</b>		<b>Date of LAN Party*</b>
<b>Phone Number*</b>	<b>Age*</b>	<b>Birth Date*</b>
(      )		
<b>Street Address*</b>		
<b>City*</b>	<b>State*</b>	<b>Postal Code*</b>
<b>Email Address*</b>		
<input type="checkbox"/> Please email me information about future LAN Parties		
<b>Please attempt to seat me near the following friends/teammates</b>		
<b>Games you hope to play at the LAN Party (select multiple)Δ</b>		
<input type="checkbox"/> Starcraft: Brood War <sup>†</sup> <input type="checkbox"/> Warcraft III: Frozen Throne <sup>†</sup> <input type="checkbox"/> Command & Conquer Generals: Zero Hour <sup>†</sup> <input type="checkbox"/> Command & Conquer Red Alert II: Yuri's Revenge <input type="checkbox"/> Homeworld 2 <input type="checkbox"/> Star Wars: Empire at War <input type="checkbox"/> Age of Empires III <input type="checkbox"/> Act of War: High Treason <input type="checkbox"/> Need for Speed: Most Wanted <input type="checkbox"/> FIFA Soccer 2006 <input type="checkbox"/> Madden NFL 2006 <input type="checkbox"/> Other _____		
Δ We cannot guarantee there will be participants playing all these games † Official tournaments may occur in one or more of these games		
<b>How did you hear about us? (select one)</b>		
<input type="checkbox"/> www.lanpartyunderground.com <input type="checkbox"/> www.cpcdanville.org <input type="checkbox"/> www.lanparty.com <input type="checkbox"/> www.bluesnews.com <input type="checkbox"/> Other Website _____ <input type="checkbox"/> Friend _____ <input type="checkbox"/> Announcement at Rock <input type="checkbox"/> Other _____		

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If you know the information, please complete the following optional survey to help us better serve you.

<b>Type of System</b> <input type="checkbox"/> PC <input type="checkbox"/> MAC <input type="checkbox"/> Other _____	<b>Operating System (circle one)</b> Windows 95 98 Me NT 2000 XP Mac OS X      Linux      Unix Other _____
<b>Processor</b>	<b>Memory</b>
<b>System Serial Number</b>	<b>Power Supply Wattage</b>
<b>Type of Monitor</b> <input type="checkbox"/> LCD <input type="checkbox"/> CRT	<b>Size of Monitor</b>
<b>Monitor Serial Number</b>	<b>Monitor Power (Amps or Watts)</b>
<b>Anti-Virus Program</b>	
<b>Anti-Spyware/Adware/Malware Program</b>	
<b>Firewall</b>	

<b>Office Use Only</b>
<input type="checkbox"/> Registration Complete
<input type="checkbox"/> Waiver Signed
<input type="checkbox"/> Waiver Signed by Parent
<input type="checkbox"/> Paid \$ _____
Date/Time Received:
Received By: