



“Largest Clown Gathering”
Pre - Register

Name:
Clown Name:
Address 1:
Address 2:
City:
State / Province:
Zip Code:
Age: _____ Sex: _____
Country:

Clown Club/School/Association:
Your E-mail Address:

- Professional
- Semiprofessional
- Student

Member ID:	EIN:	Student ID:
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Mail to:
Emmett Kelly Museum, Pre-register, 204 E. Main St., Sedan, Kansas 67361

Signed: _____ Date: _____

By submitting this form, I understand it's use is to collect information needed for the actual registration process and that I will still need to register on the day of the "Largest Clown Gathering" event, June 23, 2007. I also understand, my information will not be shared outside of the confines of the Emmett Kelly Museum or it's representatives; except my name, address, age, sex, and e-mail address may be shared with potential Sponsors in a limited fashion.