

Oxygen Mas Registration Form

Samba Na Lapa - Red

MALE \$650

MASQUERADER INFORMATION

| | | |
|-----------------------|---------------|------|
| _____ | _____ | |
| First Name | Last Name | |
| _____ / _____ / _____ | | |
| Cell | Home | Work |
| Contact Numbers | | |
| _____ | _____ | |
| e-mail Address | Date of Birth | |

SECTION INFORMATION

| | |
|------------------------|----------------------------|
| _____ | _____ |
| T-Shirt Size (XS-XXXL) | Waist Measurement (inches) |
| _____ | |
| Pants Size | |

MEAL PREFERENCE: Chicken Pork Fish

I confirm that the information provided above is accurate and true. I undertake not to switch, exchange or resell the said costume. Oxygen Mas does not take responsibility for personal errors made in sizing and all costumes given will be in accordance with the above-mentioned information given. I am aware that my Registration is **ONLY COMPLETE** after providing the necessary information on this form along with making the minimum deposit in the sum of EC\$200.00 (Back-line and Male costumes) / EC\$500.00 (Front-line costume), being a **NON-REFUNDABLE** deposit. I undertake to pay the balance due and owing on my costume **on or before June 15th, 2017**. I understand that failure to complete payment on the stipulated date will result in forfeiture of my deposit and my costume.

I acknowledge that the complete costume will be delivered to me at the Oxygen Mas Camp, Lower Bay Street Kingstown. I am personally responsible for collecting my costume, alternatively, I may give an authorized representative permission to collect same on my behalf. I am aware that in order to collect my costume I must provide 1 form of Identification and my receipt showing proof of final payment made on the said costume.

| | |
|-----------|-------|
| _____ | _____ |
| SIGNATURE | DATE |

RECEIPT NUMBER