

Mail-in registration Form and Banquet Reservation

Name: _____

Chapter/Institution: _____

Email: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

PRE-REGISTRATION ENDS ON MARCH 31, 2025

Registration: \$35.00 x _____ Student Registration: Free with Student ID _____

Banquet Buffet: \$45.00 x _____

Vegetarian or Gluten Free Option- Please circle if applicable

Total Enclosed: _____

Mail with your check payable to: Society for Pennsylvania Archaeology Box 213 New Bethlehem, PA 16242