



Anime Detour 2018 Transfer Form
April 6th - April 8th @ the DoubleTree by Hilton, Bloomington MN

Original Membership Holder:

Last Name

First Name

Middle Name

_____/_____/_____
Date of Birth: (MM/DD/YYYY)

E-mail

Confirmation Number

Your confirmation number was emailed to the email given at the time of registration. If you cannot find your confirmation number, contact ad_register@animedetour.com. You can validate if a confirmation number is valid at <http://www.animedetour.com/regtransfer>

By signing below, you authorize the transfer of your membership to the person defined in section 'Original Membership Holder'. The person in section 'Transfer Recipient' will be able to sign for and pick up your badge.

Signature

Date

Your Signature (Original Membership Holder) We will not process the transfer without this signature!

Transfer Recipient:

Last Name

First Name

Middle Name

Postal Mailing Address

Address 2 (if needed)

City

State

Zip

Phone

E-mail

_____/_____/_____
Date of Birth: (MM/DD/YYYY)

Badge Name

Your ID(Transfer Recipient) will be required to be shown before badge will be issued and must match the name entered above. I also understand that the transfer will be done at the discretion of the registration directors and is not guaranteed.