



OmaCon Registration Form

ENTRY #

Name: _____

Address: _____

City: _____ **State:** ____ **Zip:** _____

E-mail: _____

IPMS/USA # _____ **Club:** _____

Event

Cost

Adult Registration *Includes unlimited entries....*

\$15.00 _____

Junior Registration *Unlimited entries.....*

FREE _____

Total: \$ _____

Mail Pre-Registrations to
IPMS Fort Crook 7119 South 167th Circle Omaha, NE 68136