

Registration For For Dungeon Battle II

Name : _____ Age: ____

Address: _____

City : _____ State / Province: ____ FIDO Adr : _____

Zip: _____ - _____ Or _____ - _____ (Canada)

BBS Name: _____ BBS Software: _____

BBS Phone Number: (____)____-____ Baud (max): _____

Home Phone Number: (____)____-____ Multi-Node? [] Yes [] No

[] I want a Dungeon Battle II registration (\$10)

[] I want a DB 2 SYSOP control Kit (\$5)

[] I want a DB 2 registration & the SYSOP control kit (\$12)

Subtotal : \$ _____

[] I want my programs on a HD 1.44 disk (\$3 extra)

Amount Enclosed \$ _____

Comments / Suggestions :

Send this form with your U.S. funds check or money order to:

Anthony Dunleavy <--(Make check out to this name!)
38 Presidential Drive
Sicklerville, NJ 08081