Submission Form

Dark Nebulae Club

IMPORTANT: Please keep your original observing log, and submit only copies.

To:

Kathy Machin

AL Dark Nebulae Club 4845 N Smalley Ave. Kansas City, MO 64119-4234
Date:
Enclosed are all 70 required observations/images.
PLEASE PRINT CLEARLY:
NAME: Michael A. Hotka (Please PRINT your name the way you want the certificate to read)
(Please PRINT your name the way you want the certificate to read)
ADDRESS: 1425 Snowberry Ln., Broomfield, Co 80020
E-mail: mhotka@yahoo.com Telephone: 303-939-5568
Astronomical League Affiliation: Longmont Astronomical Society (Indicate name of your local affiliated club or "Member at Large")
Observing Technique Visual Imaging Both
Your certificate and pin will be sent <u>directly</u> to <u>you</u> , <u>or to</u> -your Awards Chairman, club officer or ALCOR for a formal presentation <u>by</u> at your astronomy club. Please indicate below the name and address of the individual to whom the pin and certificate should be mailed. Members-at-Large may enter "Self" below to receive the pin and certificate directly.
Mailing Address for pin and certificate
NAME: Mike Hotka
ADDRESS: 1425 Snowbarry Ln
Broomfield, LO 80020