

REGISTRATION FORM

I am hereby authorized to reserve the following exhibit space and have read the Rules and Regulations on the attached sheet of this contract. Space assignments are done by CORPORATE CYCLE CONSULTING to ensure even distribution and separation. Please submit a logo or promotional photo in jpg format as well as a company description to: sonja@corporatecycleconsulting.com.

All details must be finalized two weeks in advance. No additions will be made on site.

Company	
Contact Name	
E-mail	
	Facebook:
Business Address	
Telephone (daytime)	Cell phone
* * Type of merchandise	
	es
	Date
Online Payment & Registration: Payment by Check Make paym 5408 Berkers	
	•
Card Number	Amount charged to card
Billing address of credit card if	different than above address:
Name on card (PRINT)	Expiration Date3-digit code
Cardholder Signature	

^{**}Please email completed form to sonja@corporatecycleconsulting.com