

Smart Business Empowerment Group

Smart Networking on a Unique Platform
Thursday, September 16, 2010

INFORMATION
(PLEASE PRINT)

Name of Business/Organization _____

Name of Additional Staff _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Work (____) _____ Cell (____) _____

Fax (____) _____ Web Address _____

E-mail Address _____

Type of Product/Service _____

VENDOR FEES

Members of Success Connections Meet-up: **\$25 per-table**
Non-members: **\$35 per table**

(Due by September 7, 2010)

Vendor space is limited and reserved on a first-come, first-served basis.
Set up begins at 6:30PM and breakdown ends at 8:30PM.

PAYMENT INFORMATION

CASH

CREDIT CARD INFORMATION  or you can use **PayPal** [click here](#)
[Non member click here](#)

Card# _____ Exp. Date _____ CV# _____

Authorized by (print name as it appears on card) _____

Signature _____

I authorize the amount stated above to be charged to the credit card provided.

Fees are non-refundable after due date.

VENDOR FORM