Twelfth Anniversary Child Care Business Expo
May 22, 2010
8:00 a.m. - 4:00 p.m.
Association Sign-Up Form
Association Group Fee for the Day: $35 each ($10 off)
Must be Received by May 7, 2010

Association Name:_____ Contact Name:_____
Phone Number:_____

____The association will mail one check for payment of all registratants. __ The Association with mail multiple checks in one envelope
____The association will pay for all registrants on the following credit card: ___Visa ___Mastercard ___ Discover ___American Express ___ Diners Club International

Card Number:_____ Expiration Date:_____ Security Code: _____

First	Last	Business Name	Address	City	State	Zip	Phone	English/Spanish	AM WORKSHOP	PM WORKSHOP

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