

**Event :-Strategic Business Introductions**

<b>Start Date</b>	05/10/2019 10:30 AM	<b>End Date</b>	05/10/2019 12:30 PM
<b>Chapter</b>	Vancouver Metro,BC		
<b>Location</b>	155-5489 Byrne Road,Burnaby , British Columbia,CanadaV5J 3J1	<b>Topic</b>	Strategic Business Introductions
<b>Display your products and services</b>	A limited number of display tables are available to showcase or sell your products and services.		

Select	Ticket Type	End Date	Ticket Price
<input type="checkbox"/>	Event Fee - Member	05/07/2019	50.00 CAD
<input type="checkbox"/>	Event Fee - Guest	05/07/2019	75.00 CAD
<input type="checkbox"/>	Event Fee - Non-Member	05/07/2019	85.00 CAD
<input type="checkbox"/>	Event Fee - Late - Member	05/10/2019	60.00 CAD
<input type="checkbox"/>	Event Fee - Late - Guest	05/10/2019	85.00 CAD
<input type="checkbox"/>	Event Fee - Late - Non Member	05/10/2019	105.00 CAD

Attendee: First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: Street: \_\_\_\_\_ Street2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Credit Card :-**     Visa     MasterCard     American Express     Discover

Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Billing address of credit card: (If same as above, write "Same."): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Today's Date Is: (REQUIRED) \_\_\_\_\_

For more information:(604) 362-3464 lee-annfrancesbates@ewomennetwork.com