



Event :- 11th Annual Women's Success Summit with Sandra Yancey

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|---|--|-----------------|---|
| Start Date | 04/02/2020 10:30 AM | End Date | 04/02/2020 03:30 PM |
| Chapter | Chicago, IL | | |
| Location | 5101 W. Oklahoma Ave, Milwaukee, Wisconsin, United States 53219 | Topic | 11th Annual Women's Success Summit with Sandra Yancey |
| Display your products and services | 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 | 03/30/2020 | 59.00 USD |
| <input type="checkbox"/> | Event Fee - Guest | 03/30/2020 | 69.00 USD |
| <input type="checkbox"/> | Event Fee - Non-Member | 03/30/2020 | 99.00 USD |
| <input type="checkbox"/> | Exhibitor - Member | 04/02/2020 | 125.00 USD |
| <input type="checkbox"/> | Exhibitor - Guest | 04/02/2020 | 135.00 USD |
| <input type="checkbox"/> | Exhibitor - Non-Member | 04/02/2020 | 155.00 USD |
| <input type="checkbox"/> | Event Fee - Late - Member | 04/02/2020 | 75.00 USD |
| <input type="checkbox"/> | Event Fee - Late - Guest | 04/02/2020 | 85.00 USD |
| <input type="checkbox"/> | Event Fee - Late - Non-Member | 04/02/2020 | 145.00 USD |

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) _____

Fax this form to: (312) 602-3762

For more information: 312.520.3017 karenhaggerty@ewomennetwork.com