



REGISTRATION FORM FOR BUSINESS SURVIVAL KIT

NAME:

COMPANY:

MEMBER: _____ NON-MEMBER: _____ (check one)

of attendees: _____

Registration Fee: Members FREE: Non-Member \$25

Payment Options: Credit card /check/Cash (circle one)

Charge my: VISA ___ M/C ___ Signature _____

Card Number: _____ Expiration Date: _____

CVC Code* _____ (The 3-digit code on the back of card within sign. Line)

Please note all payments should be made by September 14, 2009. Checks should be made payable to the "Lauderhill Chamber of Commerce"

FOR OFFICIAL USE ONLY

Payment received Date _____ Amount _____

Authorized signature _____