# 2023 RETAILER PRE-REGISTRATION FORM

**Return by 11/17/2023 to AVOID additional fees of $15 each.**

## RETAIL BUSINESS INFORMATION

Proof of business license may be requested.

<table>
<thead>
<tr>
<th>Store Name:</th>
<th></th>
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<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Fax:</td>
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*Email: ________________________________

*Providing an e-mail will ensure you receive timely registration confirmations, critical updates and exhibitor follow up in a way that saves time, money and paper.

Check your preferred means of communication from SENPA:
- [ ] Mail
- [ ] Email

Your registration confirmation will be sent via your preferred method checked above. **PLEASE review confirmation upon receipt.**

## ATTENDEE INFORMATION

After 11/17/2023 add $15 to every attendee listed below.

Check appropriate box:
- [ ] Yes, my business is a SENPA MEMBER - FREE entrance to all functions. *(FULL-ACCESS)*
- [ ] I am paying dues with this registration for SENPA membership. *(FULL-ACCESS)*
- [ ] I am attending exhibits and seminars as a non-member for $50 per person. *(FULL-ACCESS)*
- [ ] Check here to attend **EXHIBITS ONLY** at NO CHARGE (Registration must be received by 11/17/2023).
- [ ] Saturday  [ ] Sunday  Enter the name(s) of each attendee and indicate if buyer.
- [ ] Check here if this is your first time attending SOHO EXPO.

Please fill in name of each staff member and check each function attending for Full Access Badges:

<table>
<thead>
<tr>
<th>Function</th>
<th>Monday Breakfast</th>
<th>Monday Lunch</th>
<th>Monday Dinner</th>
<th>Tuesday Breakfast</th>
<th>Tuesday Lunch</th>
<th>Tuesday Dinner</th>
<th>Wednesday Breakfast</th>
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## PAYMENT METHOD

- [ ] **PAY BY CHECK** - make payable to SENPA Inc.
- [ ] **PAY BY CREDIT CARD** - Visa, MasterCard and American Express Accepted.

**NOTE:** Invoice will be sent with payment instructions. Credit cards are processed through Authorize.net to ensure secure transactions. Your invoice will come from SENPA, Inc. invoice@authorize.net

REQUIRED: Authorized Signature: ________________________________

Print Name: __________________________________ Date: ___________

### TOTAL DUE

- Registration Fees ___ @$50 (if applicable) ........................................ $ __________
- Membership Dues Payment Options ............................................ $ __________
  - $95  [ ]  Yearly Dues 1 Location
  - $140 [ ]  Yearly Dues 2 Locations
  - $160 [ ]  Yearly Dues 3 Locations
  - $220 [ ]  Yearly Dues 4-5 Locations
  - $320 [ ]  Yearly Dues 6-11 Locations
  - $420 [ ]  Yearly Dues 12 + Locations

Check the box above to indicate how many stores you represent.

*Please provide names and addresses for all additional stores on a separate sheet.

Add $15 X ___ # of attendees registered after 11/17/2023 ........................................ $ __________

Grand Total: $ __________

**RETURN COMPLETED FORM TO ONE OF THE FOLLOWING or USE OUR CONVENIENT ONLINE REGISTRATION AT www.SOHOexpo.net:**

- [ ] Mail
- [ ] Email

**NOTE:** Duplicate form for additional names. List and indicate children under 16 on separate form.

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