



REGISTRATION FORM

Please fill out the following information and e-mail to bdonnell@womenslivingexpo.com

Contestant Name: _____

Contact Name: _____

Mailing Address: Entrants will be mailed 5 Free Tickets to the Women's Expo

Email Address: _____

Daytime Phone: _____

Entrants are responsible for any and all safety issues pertaining to their entries and absolve Donnell Productions and sponsors of any liability related to damage caused to persons or property by the entry.

Registration Fee - \$10.00 - **non-refundable, and non-transferable. Absolutely no exceptions under any circumstances.**

Circle Card Type:

Master Card

Visa

AmEx

Discover

Debit

Credit Card #: _____

Expiration Date: _____ **Security Code:** _____

Amount of Payment: _____

I have read and agree to the attached rules for this event and authorize Donnell Productions to charge my credit card for the Cake Party Contest Registration Fee of \$10.00.

Signature of Entrant: _____ Date: _____