

GK PRODUCTIONS

Vendor Registration Form

CHECK EVENT ATTENDING

GK FITNESS EXPO BEST ON THE BENCH



EVENT DATE: _____ AMOUNT ENCLOSED: _____

BUSINESS NAME: _____

FIRST & LAST NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

DESCRIPTION OF MERCHANDISE: _____

RETURN FORM AND FEES MADE PAYABLE TO:

GLORIA KNIGHT-McNEIL (PROMOTER)

PO Box 71473

DURHAM, NC 27722

DUE DATE: _____

ENTRY FEES MUST BE PAID BY CASHIER'S CHECK OR MONEY ORDER.

NO PERSONAL CHECKS! NON-REFUNDABLE!