



Registration Form

(Please Print)

Name _____
Mailing Address _____
City _____ State _____ Zip _____
Daytime Telephone Number _____ Fax Number _____
E-Mail Address _____
Business _____ Home _____
Would you like to be on the Women in Denim advisory committee? ___ Yes ___ No

PAYMENT:

Check # _____ Total Amount Due: _____

Please make checks payable to: Women in Denim

Note: If you have already registered by phone, fax or online, please check the box below when returning this form. A payment of \$25.00 must be made to guarantee your spot at the seminar.

Please clip and mail registration form and payment to:

Women In Denim
30 East Main Street
P. O. Box 38
Albert City, IA 50510

Previously Registered By: ___ Phone ___ Fax ___ Website ___ E-Mail

Phone: _____ Fax: _____

Website: www.womenindenim.com

E-Mail: _____

Mail: Women in Denim, 30 East Main Street, P. O. Box 38, Albert City, IA 50510