



Attendee (Non-Buyer) Registration

February 6.7.8 2012
Sands Expo, Las Vegas

Please submit this form via email to registration@wsashow.com or fax to 818.379.9410. Once your application has been processed, you will receive an email with instructions for submission of your business credentials.

Mr. Ms. Mrs. Dr.

Name _____ Job Title _____

Company Name _____

Company Address 1 _____

Company Address 2 _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Phone _____ Fax _____

E-mail _____

All questions must be answered in order to process your registration.

<p>1. What is your job title? (Check one only)</p> <p><input type="checkbox"/> Buyer</p> <p><input type="checkbox"/> Owner</p> <p><input type="checkbox"/> General Manager</p> <p><input type="checkbox"/> General Merchandise Manager</p> <p><input type="checkbox"/> Divisional Merchandise Manager</p> <p><input type="checkbox"/> Vice President</p> <p><input type="checkbox"/> President</p> <p><input type="checkbox"/> Merchandiser</p> <p><input type="checkbox"/> Corporate Executive</p> <p><input type="checkbox"/> Purchasing Manager / Director</p> <p><input type="checkbox"/> Sourcing Manager / Director</p> <p><input type="checkbox"/> Sales/ Marketing Manager / Director</p> <p><input type="checkbox"/> Advertising / Display Manager / Director</p> <p><input type="checkbox"/> Manufacturing / Production Manager</p> <p><input type="checkbox"/> Designer / Design Services</p> <p><input type="checkbox"/> Product Developer</p> <p><input type="checkbox"/> Other- Please Specify _____</p>	<p>2. What products/services does your firm Sell/Resell? (Check one only)</p> <p><input type="checkbox"/> Textiles</p> <p><input type="checkbox"/> Trim</p> <p><input type="checkbox"/> Leather</p> <p><input type="checkbox"/> Consulting</p> <p><input type="checkbox"/> Technology Solutions</p> <p><input type="checkbox"/> Store Equipment / Supplies / Fixtures</p> <p><input type="checkbox"/> Inventory Systems</p> <p><input type="checkbox"/> Contract Manufacturing</p> <p><input type="checkbox"/> Finished Footwear Accessories</p> <p><input type="checkbox"/> Other- Please Specify _____</p> <p><input type="checkbox"/> Does Not Apply</p>	<p>3. Which category most closely describes your business? (Check one only)</p> <p><input type="checkbox"/> Component Supplier - \$295</p> <p><input type="checkbox"/> Service Provider - \$ 295</p> <p><input type="checkbox"/> Jobber / Reseller - \$295</p> <p><input type="checkbox"/> Retail Services & Technology - \$ 295</p> <p><input type="checkbox"/> Design Services - \$ 0</p> <p><input type="checkbox"/> Advertising Sales - \$295</p> <p><input type="checkbox"/> Freight Forwarding / Shipping - \$295</p> <p><input type="checkbox"/> Financial Analyst - \$295</p> <p><input type="checkbox"/> Trade Show Related / Government Agency - \$ 0</p> <p><input type="checkbox"/> Manufacturer of Finished Goods - Requires Approval</p> <p><input type="checkbox"/> Other- Please Specify _____</p> <p>Credentials will be required to confirm selection above.</p>
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Payment Information (Check only one) VISA MasterCard American Express Discover

Card Number _____ V Code on the card _____

Expiration Date _____ Amount \$ _____

Name as it appears on card _____ Signature _____

Show Management reserves the right to deny any company or individual eligibility for or access to ENKWSA.

For further assistance, please email registration@wsashow.com or call 708.486.0743

AN ENK INTERNATIONAL EVENT