



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. Submit with two forms of business ID:

Business ID #1: a business card with your name and the company's name printed on the card.

Business ID #2: a copy of a current vendor invoice showing that you purchase footwear or accessories.

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 _____

What is your job title? (Select One Only)			
<input type="checkbox"/> Buyer	<input type="checkbox"/> Store Manager	<input type="checkbox"/> Purchasing Manager/Director	<input type="checkbox"/> Designer/Design Services
<input type="checkbox"/> Owner	<input type="checkbox"/> Vice President	<input type="checkbox"/> Sourcing Manager/Director	<input type="checkbox"/> Product Developer
<input type="checkbox"/> General Manager	<input type="checkbox"/> President	<input type="checkbox"/> Sales/Marketing Manager/Director	<input type="checkbox"/> Other—Please Specify _____
<input type="checkbox"/> General Merchandise Manager	<input type="checkbox"/> Merchandiser	<input type="checkbox"/> Advertising/Display Manager/Director	
<input type="checkbox"/> Divisional Merchandise Manager	<input type="checkbox"/> Corporate Executive	<input type="checkbox"/> Manufacturing/Production Manager	

My company is: (Select One Only)

Retailer or E-tailer Distributor of Finished Goods Importer/Exporter of Finished Goods Wholesaler of Finished Goods

Retail/E-tail Buyers: Please complete questions 1-4.

1. How many retail store locations does your company have? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2–25 <input type="checkbox"/> 26–100 <input type="checkbox"/> 101–500 <input type="checkbox"/> 501–1,000 <input type="checkbox"/> Greater Than 1,000	2. What is your primary business type? (Select One Only) <input type="checkbox"/> Mass Merchandiser <input type="checkbox"/> Department Store <input type="checkbox"/> Discounter <input type="checkbox"/> Specialty Chain Footwear Store <input type="checkbox"/> Specialty/Independent Footwear Store <input type="checkbox"/> Specialty Athletic Footwear Store <input type="checkbox"/> Boutique (primary apparel with footwear) <input type="checkbox"/> General Sporting Goods Store <input type="checkbox"/> Mail Order/Catalog <input type="checkbox"/> Online Retailer <input type="checkbox"/> Company/Factory Outlet <input type="checkbox"/> Buying Office <input type="checkbox"/> Other—Please Specify _____	3. My store carries: (Select All That Apply) <input type="checkbox"/> Children's <input type="checkbox"/> Men's <input type="checkbox"/> Women's
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4. What product categories do you purchase? (Select All That Apply)		
Men's Footwear <input type="checkbox"/> Dress <input type="checkbox"/> Contemporary <input type="checkbox"/> Young Men's <input type="checkbox"/> Comfort <input type="checkbox"/> Rugged/Outdoor <input type="checkbox"/> Athletic <input type="checkbox"/> Casual <input type="checkbox"/> Volume <input type="checkbox"/> Luxury Brands	Women's Footwear <input type="checkbox"/> Dress <input type="checkbox"/> Contemporary <input type="checkbox"/> Junior <input type="checkbox"/> Comfort <input type="checkbox"/> Rugged/Outdoor <input type="checkbox"/> Athletic <input type="checkbox"/> Casual <input type="checkbox"/> Volume <input type="checkbox"/> Luxury Brands	Other Products and Retail Services <input type="checkbox"/> Children's Footwear <input type="checkbox"/> Hosiery <input type="checkbox"/> Handbags <input type="checkbox"/> Jewelry <input type="checkbox"/> Accessories <input type="checkbox"/> Apparel <input type="checkbox"/> Store Fixtures <input type="checkbox"/> Store Equipment/Supplies <input type="checkbox"/> Shoe Care <input type="checkbox"/> Jobber <input type="checkbox"/> Inventory Systems <input type="checkbox"/> Retail Systems <input type="checkbox"/> Publications <input type="checkbox"/> Associations <input type="checkbox"/> Other—Please Specify _____

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