



ACCOUNTING: PO Box 50625 \* Jacksonville Beach, FL 32240  
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**Registration Senior Industry Networking Event – South Florida 2024**

Name of Business \_\_\_\_\_  
Business Category \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ email \_\_\_\_\_  
Name 1 \_\_\_\_\_  
Name 2 \_\_\_\_\_  
Name 3 \_\_\_\_\_  
Name 4 \_\_\_\_\_

**Please reserve my participation at the following date:**

Ft. Lauderdale \* August 26, 2024 \* Marriott Hotel Ft. Lauderdale North \* 6 pm to 10 pm

**Event includes:**

- Food and Beverages
- Cash bar
- Prize Giveaways
- Names and contact list of all event attendees

FEE : \_\_\_\_\_ Individual Attendee[s] @ \$59.00 per person = \$ \_\_\_\_\_

\_\_\_\_\_ I QUALIFY FOR THE FREE BONUS – I am registering within 5 days of receiving the event invitation. I will also receive a free full-page ad in the upcoming Seniors Resource Directory which is mailed to 10,000 senior households in my area.

Please mail this signed form and fee [payable to RJW] to the accounting address above or if payment by credit /debit card please fill out the section below and scan and email this signed form to [accounting@rjwcommunications.com](mailto:accounting@rjwcommunications.com) or fax to 1-888-263-4440

**Debit or Credit Card Authorization** [We can also send a secure payment link upon request via email]

Please charge the credit card below ONE TIME ONLY in the amount of \$ \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

CVS [Security Code] \_\_\_\_\_ Zip Code Credit Card Bill Is Mailed To: \_\_\_\_\_

Authorized by: \_\_\_\_\_ Date \_\_\_\_\_