

Name of Business

ACCOUNTING: PO Box 50625 * Jacksonville Beach, FL 32240

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Registration Senior Industry Networking Event – Dallas 2024

Business Category _____

Address	
Telephone	email
Name 1	
Name 2	
Name 3	
Name 4	
Please reserve my p	participation at the following date:
Dallas * August 26,	2024 * DoubleTree by Hilton – Galleria Area * 6 pm to 10 pm
Event includes:	
 Food and Be 	verages
Cash bar	
 Prize Giveaw 	·
Names and of	contact list of all event attendees
FEE :Individua	al Attendee[s] @ \$59.00 per person = \$
	THE FREE BONUS – I am registering within 5 days of receiving the event invitation. I will ull-page ad in the upcoming Seniors Resource Directory which is mailed to 10,000 senior rea.
/debit card please f	ned form and fee [payable to RJW] to the accounting address above or if payment by credit ill out the section below and scan and email this signed form to <u>mmunications.com</u> or fax to 1-888-263-4440
	d Authorization [We can also send a secure payment link upon request via email] redit 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