



March 27-28, 2009
Ohio Expo Center • Lausche Building
Columbus, Ohio

Registration/Ticket Add Form

This form can be used to add sessions to your registration for the expo.
All additions must be received by March 16, 2009 by 4:30 p.m., E.T.

1 REGISTRATION INFORMATION

Registrant's Name _____

Phone # _____ Cell # _____

E-mail _____ @ _____

2 REQUESTED ADDITIONS

Add	Registration Option	Class Title	Price	Enter Total
<input type="checkbox"/>	Admission Friday		\$ 8	\$ _____
<input type="checkbox"/>	Admission Saturday		\$ 8	\$ _____
<input type="checkbox"/>	Admission Two-Day Pass		\$ 15	\$ _____
<input type="checkbox"/>	Crop Party - Friday		\$ 25	\$ _____
<input type="checkbox"/>	Crop Party Table - Friday		\$ 150	\$ _____
<input type="checkbox"/>	Crop Spot - Saturday		\$ 15	\$ _____
<input type="checkbox"/>	Class # _____	_____	\$ _____	\$ _____
<input type="checkbox"/>	Class # _____	_____	\$ _____	\$ _____
<input type="checkbox"/>	Class # _____	_____	\$ _____	\$ _____
<input type="checkbox"/>	Class # _____	_____	\$ _____	\$ _____
				\$ _____

3 METHOD OF PAYMENT (Payment due at time of order.)

- Company Check Cashier's Check/Money Order (Make check payable to Offinger Management Co.)
 Debit Card Credit Card American Express Discover MasterCard VISA

All payments in U.S. funds drawn on U.S. banks. \$25 fee charged for returned checks.

Credit Card Account # _____ Exp. Date _____

Amt. charged \$ _____ Cardholder's Name (Print) _____

Authorized Signature _____

4 PLEASE SIGN FORM

NO REFUNDS OR EXCHANGES FOR ADMISSION TICKETS, CLASSES, CROP PARTIES, OR OTHER TICKETED SESSIONS AT ANY MEMORIES SCRAPBOOKING EXPO™. Offinger Management Co. will issue check overpayments at the Show site. They must be picked up at the registration counter or be forfeited. No refunds will be issued for coupons or discounts. Refunds will not be issued based on perceived quality of the class or Event. I confirm that all information and credentials provided herein are true and accurate and I agree to all Show policies and regulations. I hereby release Offinger Management Co., sponsors, its officers, agents and employees from any and all liability, claims, lawsuits, damages, losses, costs, and expenses of any kind which arise out of or result from my attendance at the Memories Scrapbooking Expo™, whether or not foreseeable, including without limitation, personal injuries to me or my invitees. With my attendance at this Event, I realize that I and/or my products may be included in publicity photos. I hereby give my consent to the Event's producers to use any photos and/or comments in future promotional materials.

PLEASE SIGN NAME

SIGNATURE _____ DATE _____

5 RETURN THIS FORM

Complete and mail or fax to:
Memories Scrapbooking Expo™
1100-H Brandywine Blvd.
Zanesville OH USA 43701-7303
PH: 740-452-4541 • Fax: 740-452-2552

FOR OFFICE USE ONLY	
Rcvd _____	Amt _____
Ck# _____	Ackd _____