



**BOOK FAIR VENDOR
REGISTRATION FORM**
Saturday, September 21 1:00 - 3:00 pm

RESIDENT NAME: _____

BUSINESS NAME (if applicable): _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: Frisco, Texas 75036

PHONE NUMBER: (_____) _____ - _____

EMAIL ADDRESS: _____

NAME(S) OF PUBLISHED BOOKS: _____

WOULD YOU BE INTERESTED IN PARTICIPATING IN A PANEL DISCUSSION ON "HOW TO WRITE A BOOK" ?

Booths will not be reserved without a completed registration form.

FOR STAFF USE ONLY

RECEIVED BY: _____

DATE/TIME RECEIVED: _____

CONFIRMATION SENT: _____
