



SPORTS EXPO

NAME OF BUSINESS / CONTACT NAME:	
EXPO TRIATHLON EVENT(S) YOU WOULD LIKE TO PARTICIPATE IN:	
SIZE OF SPACE YOU WOULD LIKE:	
TYPE OF BUSINESS OR PRODUCT:	
MAILING ADDRESS:	
PHONE NUMBER:	
FAX NUMBER:	
E-MAIL ADDRESS:	
IF PAYING BY CHECK: ENTER CHECK #	
AMOUNT ENCLOSED:	
VISA/MASTERCARD/AMEX #:	
DATE OF EXPIRATION ON CARD MM/YY :	
NAME AS IT APPEARS ON CARD:	
CARDHOLDERS SIGNATURE:	

INFORMATION MUST BE FILLED OUT COMPLETELY

****CONFIRMATION LETTERS WILL BE MAILED OUT UPON RECEIPT OF PAYMENT***

REMIT TO: **J&A PRODUCTIONS**
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 PMB 214
 Hayden, ID 83835

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 FAX: 1-800-883-5695