

**Please Download Form to your Computer. Then open the saved form in order to complete & submit.**



**CPE INTERNATIONAL 2019  
AUTHOR REGISTRATION FORM**

August 25-27, 2019  
www.cpeshow.com

**Registration Information:**

Name		Address	
City		State	Postal Code
Telephone	Fax	Email	

**Badge Information - \$100 per badge**

**Name as it should appear on Badge:**

**Includes:** 1 Year CRA Membership, Entrance to Show Floor, Monday & Tuesday Author Training, and Monday & Tuesday Lunch

Select One Training Class for Each Day			
<input type="checkbox"/> Monday (Retailer Relations) 1:30-4:30pm	<input type="checkbox"/> Tuesday (BrandStorming) 1:00-4:0pm		
<input type="checkbox"/> Monday (Social Media) 1:30-4:30pm	<input type="checkbox"/> Tuesday (Email Marketing) 1:00-4:00pm		

**Ticket Information**

**Qty Cost Total**

Ticket Information	Qty	Cost	Total
Saturday Dinner Industry Night Out - Self pay at restaurant but reserve seating		Reserve	
Sunday Lunch Tickets - Golden Scroll Banquet - www.scrollawards.com		Reserve	
Sunday Dinner Banquet Tickets			
Monday Dinner Banquet Tickets			

**Evening Events - FREE**

After each dinner, there will be an entertaining event that is free to attend. However, we will need to capture a headcount to ensure enough space. Please select each event you would like to attend:

- Sunday Night Comedy Show       Monday Night Comedy Show

**Special Dietary Selections:**

- Dairy Free     Vegetarian     Gluten Free     Allergy: \_\_\_\_\_

**Authors:**

If you are interested in participating in the Personality Party on Sunday, August 25, you must complete the application process.  
See www.cpeshow.com for details, click on Personality Party on the CPE International 2019/Authors page.

**Hotel Information**

Embassy Suites, 1200 Conference Center Blvd, Murfreesboro, TN 37129 • 615-890-4464  
**Rate:** \$139/night + tax (\$10 more per person per night) if reserved by July 30, 2019  
**Code:** MUN

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

In signing, I understand that the amount indicated will be charged to the credit card given at the time of submission. This fee is only refundable if cancelled before July 30, 2019.

**Please complete the credit card payment form and fax to 855-815-9277.**



## CREDIT CARD PAYMENT FORM

Please complete this form and submit to:  
200 West Bay Drive, Largo, FL 33770  
P 727-596-7625  
F 855-815-9277

### Method of Payment

VISA       MasterCard       AMEX       Discover

### Credit Card Information

Company Name		Name on Credit Card	
Billing Address			
City		State	Postal Code
Telephone		Email	
Credit Card #			
Exp Date		CVV (3 or 4 digit code)	
Amount to be charged \$			

I hereby authorize CPE International to charge my credit card in the amount indicated above:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please note: For security reasons, we do not retain credit card information. This information will be used to complete this transaction and then it will be destroyed.

**Please fax this payment information to 855-815-9277.  
We advise against emailing credit card details because email is not secure.**