SOUTHEASTERN KENTUCKY FRIED CHICKEN FRANCHISEE ASSOCIATION, INC.

PRE-REGISTRATION

TO: SECRETARY-TREASURER, Bonny Shelton
P.O. Drawer 1122
Danville, VA 24543-1122

PLEASE REGISTER THE FOLLOWING PEOPLE FOR THE MEETING ON APRIL 25-28, 2010.

NAME (AS YOU WANT YOUR NAME TAG TO READ)	**CITY AND STATE – FRANCHISEE/ASSOCIATE** (FOR NAME TAG)

REGISTER_____ADULTS AT @ $150.00 PER PERSON FOR THE UPCOMING MEETING.

REGISTER_____CHILDREN AT @ $75.00 (AGES 12 and under) PER CHILD FOR THE UPCOMING MEETING.

☐ **A CHECK IN THE AMOUNT OF_____IS ENCLOSED TO COVER THE REGISTRATION.**

☐ **PLEASE CHARGE MY CREDIT CARD:**

☐ American Express ☐ Discover ☐ MasterCard ☐ VISA

Acct. # _____

Exp. Date _____

***Verification Code:_____
(On the back of all MasterCards and VISAs, in the signature box, there is a string of numbers: the last four digits of your account number and a three-digit code. The three digit code is your verification code – MasterCard and VISA only).

(FOR OFFICE USE ONLY - CUSTOMER #_____)

_____
FRANCHISEE NAME

_____
FRANCHISEE ADDRESS

_____
CITY **STATE** **ZIP**

_____
PHONE # **FAX #**

_____
E-MAIL ADDRESS