



Oct 18-19, 2017 Durham, NC

REGISTRATION FORM

Na	nme of Attendee			
Na	me of Organization			
 Ma	ailing Address		State	Zip
Ph	one Emai	I		
We	ebsite			
Bil	ling Address □ same as above		State	Zip
	 □ Early Bird Rate \$295 (Before 7/1/17) □ Early Bird Rate Additional Attendee (Before 7/1/2) □ x \$195 each □ Full Rate \$350 (After 7/2/17) □ Full Rate, Additional Attendee (Before 7/1/17) x \$250 each 	17)		
	Check enclosed (made payable to The Scrap Exchange) Charge my credit card		TOTAL \$	
	Name on card	Card number		
	Expiration date	CSV		
	Names of additional attendees			

Mail form to: The Scrap Exchange, 2050 Chapel Hill Road, Durham, NC 27707