

FREE ATTENDEE REGISTRATION



Please print all information clearly • Make copies of this form for additional registrants
All attendee badges must be picked up on site

1. Your Name: _____

2. Store or Business Name: _____

3. Street or P.O Address: _____

4. City: _____ State: _____ Zip: _____

5. Telephone: _____ Fax: _____

6. Email: _____

7. What day(s) do you plan to attend the show? Saturday Sunday

8. Type Of Business (*check only one*):

- A) Natural/Health Food Store
- B) Supermarket
- C) Drug Store/Pharmacy
- D) Natural Product Broker
- E) Wholesaler/Distributor
- F) Manufacturer/Supplier
- X) Professional Health Care
- G) Spa
- H) Other (please specify):

9. Job Title Or Function (*check only one*):

- A) Owner, President, Chairperson, CEO, Partner
- B) VP, COO, CFO, GM
- C) Division/Store Manager
- D) Buyer/Marketing Manager
- X) Health Care Practitioner
- E) Other allied to the field (please specify):

10. Do you wish to receive a free subscription to Vitamin Retailer magazine? If yes initial here: _____

11. Do you wish to receive a free subscription to Organic Products Retailer? If yes initial here: _____

12. Signature: _____ Date: _____

Note: Registration to attend the 2010 Health and Nutrition Show is available to all retailers of the dietary supplements and nutritional products industry. Registration is not open to the general public or to non-industry members. By signing above you are claiming to be employed or professionally affiliated with the dietary supplements and nutritional products industry and agree to abide by all rules of the Health and Nutrition Show. The show management retains the right to request proof of business affiliation, and may reject at its sole discretion any registration requests.

Fax this form to: (805) 646-5020

Or mail to: TLC Tradeshow Productions, 400 Buckboard Lane, Ojai, CA 93023

Register online: www.healthandnutritionshow.com