



Colorado Teen Literature Conference Exhibitor Registration Payment

Thank you for exhibiting at our conference! Please fill out this form and mail it with your full payment check to the following address:

CTLC
PO Box 740152
Arvada, CO 80006

Fill out the following:

Main Contact Name: _____

Main Contact Email: _____

Registrations for the following attendees:

Name:	Registration Type: <input type="checkbox"/> Private Exhibitor at \$80 <input type="checkbox"/> Non-Profit/Gov Exhibitor at \$60
Name:	Registration Type: <input type="checkbox"/> Private Exhibitor at \$80 <input type="checkbox"/> Non-Profit/Gov Exhibitor at \$60 <input type="checkbox"/> Extra Lunch Fee at \$30
Name:	Registration Type: <input type="checkbox"/> Private Exhibitor at \$80 <input type="checkbox"/> Non-Profit/Gov Exhibitor at \$60 <input type="checkbox"/> Extra Lunch Fee at \$30
Name:	Registration Type: <input type="checkbox"/> Private Exhibitor at \$80 <input type="checkbox"/> Non-Profit/Gov Exhibitor at \$60 <input type="checkbox"/> Extra Lunch Fee at \$30

Total payment amount included: \$ _____

Please keep a copy of this completed form for your records if you require a printed invoice of your payment.