

SBDC REGISTRATION FORM

Preregistration and if applicable, prepayment for workshops is required.

Please Print

You are thinking of or are in the process of starting a business.

You have an existing business.

Name: _____

Name of Business: _____ Business Fax: (____) _____

Business Address: _____

Street

City

State

Zip Code

Business Phone: (____) _____ Business E-mail: _____

Home Address: _____

Street

City

State

Zip Code

Home Phone: (____) _____ E-mail: _____

Workshop Title	Location	Date	Time	Fee*

*For workshops without a fee, write n/a.

Total \$ _____

Payment Options

Credit Card: Visa Mastercard Expiration Date: _____

Card # _____ - _____ - _____ - _____ (Card number must be 16 digits)

Cardholder Name: _____

Authorized Signature: _____

Fax completed form to 310-973-3132, or by mail: SBDC Workshop Registration, 13430 Hawthorne Blvd., Hawthorne, CA, 90250. Cash payments in the exact change are accepted in person at the SBDC office. Checks are not accepted. Call SBDC at 310-973-3177 if needed for assistance. SBDC reserves the right to cancel a workshop for lack of the required number of registrants. In the event that your workshop is cancelled, you may take another workshop in its place.