



HEALTHFEST

Showing Others Healthy Options

Trade Show & Convention: April 22-24, 2022
Tabletop Exhibits: April 24, 2022
Omni Mandalay Hotel at Las Colinas Dallas, TX

2022 RETAILER PRE-REGISTRATION FORM

Return by 4/8/2022 to AVOID additional fees of \$10 each

RETAIL BUSINESS INFORMATION Proof of business license may be requested.

Store Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (____) (____) (____) Fax: (____) (____) (____)
 *Email: _____

*Providing an e-mail will ensure you receive timely registration confirmations, critical updates and exhibitor follow up in a way that saves time, money and paper.

Check your preferred means of communication from SENPA & SOHO Healthfest:

☐ Mail ☐ Email

Your registration confirmation will be sent via your preferred method checked above.
PLEASE review confirmation upon receipt.

ATTENDEE INFORMATION

After 4/8/2022 add \$10 to every attendee listed below.

Check appropriate box:

- ☐ Yes, my business is a **SENPA MEMBER - FREE** entrance to all functions. (**FULL-ACCESS**)
- ☐ I am paying dues with this registration \$95 for SENPA membership. (**FULL-ACCESS**)
- ☐ I am attending exhibits and seminars as a non-member for \$50 per person. (**FULL-ACCESS**)
- ☐ Check here to attend **EXHIBITS ONLY** at **NO CHARGE** (Registration must be received by 4/8/2022).

Fill in name of each staff member and check each function attending for Full Access Badges

	Buyer	Staying at Omni Mandalay	Friday Lunch	Dinner	Sat. Breakfast	Lunch	Dinner	Sunday Breakfast
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Duplicate form for additional names.
 List and indicate children under 16 on separate form.

**RETAIL MEMBERS GET
 UNLIMITED
 STAFF BADGES**

PAYMENT METHOD

- ☐ **PAY BY CHECK** - make payable to SENPA Inc.
- ☐ **PAY BY CREDIT CARD** - Visa, MasterCard and American Express Accepted.

NOTE: Invoice will be sent with payment instructions. Credit cards are processed through Authorize.net to ensure secure transactions. Your invoice will come from SENPA, Inc. invoice@authorize.net

REQUIRED: Authorized Signature: _____

Print Name: _____ Date: _____

TOTAL DUE

Registration Fees ____ @ \$50 (if applicable).... \$____

Membership dues @ \$95 \$____

SENPA Support Club \$____

Add \$10 X ____ # of attendees registered after 4/8/2022 \$____

Grand Total: \$____

NOTE: All Meal Functions require pre-registration and are FREE for FULL-ACCESS attendees

A confirmation will be sent via your preferred method checked above. Please review confirmation upon receipt, badges to be picked up at show.

SPECIAL SERVICES

☐ Check here if an attendee requires special accommodations to fully participate. Attach a written description of their needs and their name.



Everyone is required to wear a SOHO Healthfest badge at ALL functions. Advance meal reservations are required due to the number of sponsored meal sessions. Meals available on a first-come basis. Once the event is "sold out", we will be unable to confirm a reservation for that event. Cancellations and requests for refunds must be received in writing by 4/8/2022. NO REFUNDS will be made after 4/8/2022 or for no-shows.



5946 Main Street
 New Port Richey, FL 34652

727.846.0320
www.SOHOHealthfest.net

FAX completed form to 800.828.7250 OR EMAIL completed form to info@SOHOhealthfest.net

