



## ORGANIZATION REGISTRATION

Date: \_\_\_\_\_ Program Area: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Website (if one exists): \_\_\_\_\_ Fund Raising Goal: \$ \_\_\_\_\_

Number of Members: \_\_\_\_\_ Tax Exempt 501(c)3# \_\_\_\_\_

Organization Leader/President

Activity Coordinator

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

e-mail: \_\_\_\_\_

e-mail: \_\_\_\_\_

Yes, we will be participating in the Program: (  )

WE understand that there is NO COST or OBLIGATION to our organization to participate in the PROGRAM the only requirement is to send a delegation of five people to all six Mini Trade Fairs and that all funds earned through the Program will be distributed in the name of our Organization and not to any individuals.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Please fax, e-mail or mail Registration Form(s) to:

Fax to (562) 595-4155 or mail to:

Points for Profit

Attention: Organization Registration Division

3761 Elm Avenue

Long Beach, CA 90807