



CAPE FEAR WILDLIFE EXPO
311 Judges Rd. Suite 11-A
Wilmington, NC 28405
(910) 795-0292

NAME BADGE REQUEST FORM

Please Submit By Feb. 1st, 2010

Fax: 910-794-3045 or email: expo@capefearwildlifeexpo.com

Please identify the number of badges your company needs. Only fill out requests for those working your exhibit. Badges will be given out at Registration/Load-in only. No badges will be mailed prior to the event. **Vendors can not enter the venue without an official badge.**

Only one company name will be listed per booth for your vendor badges. Please Print:

Company Name (to be listed on badge): _____

City and State of Company: _____ Indoor Booth #: _____

Responsible Booth Rep: _____ Outdoor Exhibit#: _____

Rep's Email: _____ Cell #: _____

Please print clearly **the first and last name** for each vendor attending your booth:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____