



**Women's Automotive Association International**  
**BANG! "Getting Your Message Heard in a Noisy World"**  
**April 8, 2004 • New York International Auto Show, New York City**

**Registration Form**

**CONTACT**

Name (individual or business) as it should appear in print: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Daytime Phone: \_\_\_\_\_ Fax # \_\_\_\_\_  
 Email address: \_\_\_\_\_

**JOIN THE WAAI**

\_\_\_\_\_ Yes, I want to become a Member. \_\_\_\_\_ \$85 Regular \_\_\_\_\_ \$25 Student  
 \_\_\_\_\_ Please send me additional details.

**TICKET RESERVATION**

Members Only:

\_\_\_\_\_ Yes, I plan to attend. Please reserve \_\_\_\_\_ tickets at \$75 each.

Non-Members or Guests of Members:

\_\_\_\_\_ Yes, I plan to attend. Please reserve \_\_\_\_\_ tickets at \$100 each.

Students (with current valid I.D.):

\_\_\_\_\_ Yes, I plan to attend. Please reserve \_\_\_\_\_ tickets @ \$50 each.

**SPONSORSHIP SUPPORT**

Sponsorship: \$ \_\_\_\_\_ (See opportunities.)

**METHOD OF PAYMENT**

Check / Charge / Invoice (circle one)

American Express \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_

Account No. \_\_\_\_\_ Expiration \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please fax form to Barbara Shipp-Clark, WAAI President/Executive Director, 845-348-1660  
 or mail checks payable to the WAAI, P.O. Box 2535, Birmingham, MI 48012**

**NAMES OF GUESTS** Please provide the first and last names of your guests.

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

**PLEASE SIGN AND FAX COMPLETED FORM BY APRIL 2, 2004 TO 845-348-1660**

Signature: \_\_\_\_\_ Date \_\_\_\_\_