



Be Sure with PURE

PURE Oil Jobbers Cooperative, Inc.
2020 PURE Marketers Convention

Registration Form

PLEASE PRINT NAMES AS IT SHOULD APPEAR ON NAME BADGE

Name: _____ Spouse: _____

Guest: _____ Guest: _____

Company Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone: () _____ Fax: () _____ Email: _____

Member Registration Fee:	\$200.00	(Includes 1 guest)	\$ _____
Additional Guest Fee:	\$100.00 each	(\$100.00 x _____ =)	\$ _____
		TOTAL	\$ _____

Please indicate the number of persons in your party who will be attending the following.

- _____ **Dinner Thursday Evening**
- _____ **Breakfast Friday Morning**
- _____ **Annual Shareholders' Meeting Friday**

Note: If anyone in your party has special dietary considerations, please let us know.

**Please fax or email this form to the PURE Co-op Office at
888-484-0878 OR info@besurewithpure.com.**

We will invoice you, so please choose:

_____ **pay by check**

_____ **draft business account.**

**If you have questions or need additional information, please don't hesitate to call us
(the PURE Co-op office) at: 1-704-508-9003.**