

Chamber Event Registration Form

Please fill out this form and email it to the event coordinator or fax it to 610-758-9533.

I/We would like to attend the following event(s):	
Date of the event(s):	
Name(s):	
Company and Complete Addre	ess:
	Phone:
	with my (circle one) Visa / MasterCard / Discover / AmEx.
Please see our new policy belo	w*
Card #:	V-Code**:
Exp:	
Name on Card:	Address for Card:
	back of your credit card to ensure your security.
☐ Please charge to the credit	card info above
	(circle one) Visa / MasterCard / Discover / AmEx for the Amount of \$
F	
Name on Card:	Address for Card:
	back of your credit card to ensure your security.

For reservations to be accepted they must be accompanied by a payment or "held" with a credit card number until an alternate payment is received, or the reservation is cancelled. When "holding" a reservation with a credit card number, alternate payment must be provided to The Chamber 30 days after the date of the event or the original credit card number will be charged. Attendees without a reservation will be required to pay the walk-in fee at the door.

Cancellations: All cancellations must be received 48 hours prior to the event to avoid charges or to receive a refund.