



Taste of CMN, Author/Artist Meet & Greet Order Form

Organization Name _____ Phone _____

Primary Contact _____ Contact Email _____

(Check one: Day/Type of Table Sponsorship)

- TUESDAY, TASTE OF CMN for Product Suppliers and Service Providers
- WEDNESDAY, AUTHOR MEET & GREET for Publishers and Authors
- THURSDAY, ARTIST MEET & GREET for Artists

Participant bringing 150 free books / art or product samples Check yes:

(For Books): Date of CWG Approval, or Imprimatur:

Title of book or featured art:

Author, Artist, or Business Representative name to put on signs:

Event Participation Table @ \$ 300.00 each

****ALL CMN Sponsor organization memberships must be active at the time of the event.***

TOTAL EVENING EVENT PARTICIPATION COST

..... \$

Required deposit to hold your table – 50% of table fee total **DUE NOW.**

Balance due by April 1st, 2020.

Event Participation Payment and Refund Policy

Required deposit to hold your table – 50% of table fee total DUE NOW. Balance of the fee is due by April 1st, 2020.

Please make your check payable to: Catholic Marketing Network and mail to: CMN, P.O. Box 610465, Dallas, Texas 75261.

To arrange to pay with a credit card, please contact Silvia Osong at 800-533-7083 or sosong@catholicmarketing.com

50% of monies or deposit received are refundable if written cancellation is received at the CMN offices by April 14th, 2020 (90 days' notice).

No refunds will be made for cancellations of event table space after May 4, 2020

Purchase Authorization

I hereby authorize this purchase of Advertising and agree to abide by the general terms and provisions, provided by Catholic Marketing Network.

Authorized Signature _____ Date _____

CMN Acceptance Signature _____ Date _____