

Oct. 5 & 6, 2019 York Expo Center York, PA

Stage Feature Information

Please print clearly or type. FAX completed form to 717-637-9006 or MAIL to: Women's Show, c/o Brooke Wilson, 275 Radio Road, Hanover, PA 17331.

COMPANY/ORGANIZATION	NAME:		
CONTACT PERSON:			
ADDRESS:			
PHONE/FAX:	EMAIL:	EMAIL:	
PERFO	ORMANCE INFORMATION		
PERFORMER'S NAME/GROU	JP:		
PERFORMANCE TITLE:			
PREFERRED TIME: (CIRCLE ONE	E) SAT AM SAT PM	SUN	
DESCRIPTION OF PERFORM	ANCE/DEMONSTRATION (will be used fo	r Women's Show publicity):	
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BACKGROUND/CREDENTIA	LS OF PRESENTER OR GROUP:		

If you have any questions about this form, please contact Brooke Wilson, Marketing & Events Coordinator, at 717-637-3831.