

## Name Tag Order Form

**Welcoming Services Professional Network**

\$12.00 per badge Check payable to: **WSSD**

Mail form including check payment to:

WSSD P.O. Box 1022 San Marcos, CA 92079

Print Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Chapter: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Sponsored by: \_\_\_\_\_

For Card payment: Visa / MC / Discover

Name on card: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CVV Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Amount: \_\_\_\_\_

Email order to: [info@wspn.biz](mailto:info@wspn.biz)

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