



**KEEP THIS RECEIPT & FLOOR PLAN CARD
FOR ENTRY TO SHOW**

CHARLOTTE CBA BIKE SHOW & SWAP MEET

Rick Nail **CBA**

10217 PIONEER MILL RD.
CONCORD, NC 28025
704-455-6245

Date of Show: _____

PRE- REGISTRATION FORM

Shop Name _____

Contact Person _____

Email _____

Address: _____

Date: _____

City: _____

State _____

Zip Code: _____

Check Box

**PLEASE CHECK HERE IF YOUR
MAILING ADDRESS HAS CHANGED.**

Phone Number: _____

What will you be Vending?

Pre-registration requires a minimum 25% deposit. Balance MUST be received 30 days PRIOR TO SHOW or you must pay full price!

Deposit Paid: _____

Balance Owed: _____

Paid In Full: _____

Signed By: _____

Building# _____

Space # _____

Current Date: _____

CBA Official: _____

30 Days Prior Notice REQUIRED For Cancellation