



**Marlborough Chamber of Commerce**

**EVENT REGISTRATION FORM**

I would like to attend

Name of Event.....

Contact Name.....

Company.....

Address.....

Phone.....Email.....

Please provide the name and company of each person attending the event with you

Name.....Company.....

Name.....Company.....

Name.....Company.....

Name.....Company.....

Return the completed registration form to the Marlborough Chamber of Commerce, PO  
Box 658, Blenheim or fax 03 579 5203.

*Please do not send payment with your registration form,  
an invoice will be sent accordingly.*

**Cancellation Policy**

*Cancellations should be advised at least two full working days prior to the date of the event. Please  
telephone 03 57 77 347 as soon as possible if you are no longer able to attend the event you have  
registered for.*

*Full refunds will only be given for cancellations received with sufficient notice as above.*