



Name Badge Order Form for Members

(Please type or print clearly, **and mail or FAX** to the Network Office)

Member's

Name: _____

Company

Name: _____

Name Badge Price: \$20.00

My check is enclosed (payable to Fresno Women's Network)

Please charge to my VISA MasterCard AMEX

Card # _____ Exp. Date _____

Cardholder's Signature _____

1303 E. Herndon Ave., Mail Stop 55 Fresno, CA 93720

Ph # (559) 450-2102 Fax # (559) 450-2041

Web site: www.fresnowomensnetwork.org E-Mail: office@fresnowomensnetwork.org