

# EXHIBITOR EMPLOYEE LIST

**Exhibitor Company Name:** \_\_\_\_\_

Employees must be on this list to enter the show through the exhibitor entry or they will need to pay admission. This list is for employees only! Additional passes for employees above the 4 per booth may be purchased \$5/each.

## NAMES

The Names on the list must have ID to pick up their Exhibitor Passes to get into the show.

1) \_\_\_\_\_

2) \_\_\_\_\_

Wristbands will be provided for entry and re-entry into the show. Each day of the show will have a different color.

3) \_\_\_\_\_

Torn, shredded or broken wristbands will not be admitted.

4) \_\_\_\_\_

Additional Names

Please use one of the following to send us this list:

5) \_\_\_\_\_

Email: [info@spokanegolfshow.com](mailto:info@spokanegolfshow.com)

Fax: 509-621-0118

6) \_\_\_\_\_

Mail: PO Box 85  
Newman Lake, WA 99025

7) \_\_\_\_\_



For Office use:

Approved by: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional passes - Inv