



The American Sewing Expo™, Inc



2010 Show Your Support Challenge

Name _____

Address _____

City _____ State _____ Zip code _____

Phone _____ email _____ @ _____

Hometown Newspaper _____

Newspaper Contact Phone & Email Address _____

Title of entry _____

Entry fee: \$5.00 – Full amount to be donated to the Barbara Ann Karmanos Cancer Institute

____ I would like my bra returned and have enclosed an additional \$5 for return postage

____ I will pick up my bra at the show with photo ID – September 26 between 5:00pm and 5:30pm ONLY

____ I would not like my bra returned and understand it will be donated

Method of payment: (circle one) Check MO Credit Card

Card # _____ Expiration Date: ____/____ Security Code: _____

Check # (Make Check Payable to American Sewing Expo) _____

Send entry, non-refundable entry fee, and this form to:

The American Sewing Expo
Show Your Support Bra Challenge
1385 Clyde Road
Highland, MI 48357

All entries must be received at our office by **September 1, 2010**. Late entries will not be accepted.

My signature indicates I agree to all rules and provisions of the American Sewing Expo Show Your Support Bra Challenge sponsored by Coats & Clark.

Signature

Date