



OFFICE: (251) 622-7777

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ON-LINE AUCTION REGISTRATION FORM

AUCTION: _____ DATE: _____

In order to be eligible to bid, please complete and return this registration form immediately.
Number of people who will be attending auction: _____

PLEASE PRINT

NAME: _____ PHONE: _____
LAST FIRST

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PERSONAL E-MAIL: _____

DRIVER'S LICENSE NUMBER: _____ STATE: _____

BUSINESS NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BUSINESS E-MAIL: _____

RESALE TAX ID #: _____ STATE: _____

I WILL BE PAYING BY: CASH _____ PERSONAL CHECK _____ COMPANY CHECK _____

I LEARNED OF THIS AUCTION FROM: _____

I HEREBY acknowledge and accept all AUCTION TERMS & CONDITIONS posted on
www.BKAuctionservices.com

SIGNATURE: _____ DATE: _____

Email or fax Registration Forms 24 hours prior to the auction.