

JW MARRIOTT WASHINGTON, DC • 14 - 16 JUNE 2012 • THURSDAY – SATURDAY

EXHIBITOR SPACE APPLICATION

Complete this form promptly and mail it with your check to ensure your space reservation.
All space assignments will be given on a first-come, first-served basis.

Exhibitor Fee Included in Support Level • **Full Payment must accompany this completed form**

Payment Method

Check in the amount of \$ _____ payable to **Georgetown University Hospital, Federal Tax ID 52-2218584**

Charge in the amount of \$ _____ Visa Master Card American Express Discover

Credit Card Number _____ Exp. Date ____/____/____

Security Pin# _____ (3 or 4 digit number on back of card)

Cardholder Name _____ Signature _____

Mail Checks and Application to:

AWR Administrative Headquarters ■ 1018 Harding Street ■ Suite 207 ■ Lafayette, LA 70503

Company Name: _____

NAME FOR BOOTH SIGN: _____

Printed Name of Authorized Person: _____

Title: _____

Authorized Signature: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ - _____ - _____ Fax: _____ - _____ - _____

E-Mail: _____

Product or Service to be displayed (*Attach Description of Product*): _____

We prefer NOT to be next to or across the aisle from: _____

All representatives MUST be registered
with the conference.

Freeman Decorating Company
will forward an exhibitor packet upon receipt
of your application and payment.



For further information, contact
Brandy D'Heilly, Exhibit Coordinator
AWR Administrative Headquarters

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brandy@AWRconference.com ■ www.AWRconference.com