## **EXHIBIT REGISTRATION**

Mail completed form to:

NACE International Attn: Jennifer O'Reilly 1440 South Creek Drive Houston,TX 77084-4906

Fax completed form to:

+1 281/228-6342

Questions? Call: F-mail:

Mail OR fax form—do NOT do both as duplicate registrations may occur. +1 281/228-6242

jennifer.oreilly@nace.org

Company:		
Exhibit Full Conference Registration		
		(first/last name)
Discounted Exhibit Registration		
(One per paying company.)		(first/last name)
Free Booth Attendant		
		(first/last name)
Additional Booth Attendant		
(Additional fee required, see below)		(first/last name)
Address:		
City:		
State/Province:		Zip/Postal Code
Country:		
Phone Number:		
E-mail Address:		
Note: If you have a disability that may affect your participation, check here and fax a written description of your needs to +1 281/228-6342. NACE will contact you.		
		PAYMENT INFORMATION
REGISTRATION CATEGORIES & FEES		PAYMENT INFORMATION
Advance Registration		Payment in U.S. dollars drawn on a U.S. financial institution. Registrations will not be processed without payment.
\$1350 exhibit space (one 10'x8' booth space, I full conference registration and I free booth attendant		Please do not ask to be invoiced.
\$300 one discounted registration		Total payment in U.S. \$:
\$ 150 additional booth attendant (access to exhibit area only)  REGISTRATION POLICIES		☐ Check enclosed—check number:
All exhibit fees MUST be included with this form, Please allow for mail time, Cancellations MUST be		☐ Charge my credit card: ☐ MasterCard ☐ VISA ☐ AMEX ☐ Discover
received in writing and cancellation fees apply.	. Cancellations received by November 26, 2007, will receive	Card #:
the exhibit fee paid less a \$100 fee. There will be no refunds or cancellations accepted after November 26, 2007. In the event that any damage occurs to the Hotel's furniture, fixtures, building, or equipment		Exp. Date:
is caused by installation, presence, and/or removal of program materials that are the direct cause of said company identified in this contract, said company shall reimburse the Hotel for the cost of such repairs or replacements as necessary. The Hotel, upon request, will supply said company by said co		Name on Card:
		Signature:

