



Exhibitor Registration

12th Annual National CEU Conference
The Olmsted
3701 Frankfort Avenue
Louisville, Kentucky 40206



The time to prepare for BIG change.....IS HERE!

**Thursday, October 4th, 2012
7:30 am – 5:00 pm**

Exhibitor Information - DEADLINE SEPTEMBER 10th

Company _____ Contact _____
Mailing Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____

Confirmation sent via Email

Email Address _____

Representative #1 Name _____
Email Address _____ Phone _____

Representative #2 Name _____
(additional \$75) Email Address _____ Phone _____

Exhibitor Booth Information (\$279)

Skirted & draped 8' table, & two folding chairs.

Electricity

In need of electricity? Additional fee not required by The Olmsted; bring your own cords. All electrical cords laid by an outside vendor must be completely covered or taped by the user and said covering must meet the final approval of The Olmsted management on duty.

Door Prize

For additional recognition during the conference, it is recommended that all exhibitors provide at least one door prize. Schedule for door prize give away will be provided at conference.

Win a FREE Booth for 2013

Each Exhibitor will receive one ticket to enter the FREE Booth drawing (valued at \$279) for next year's conference. Bag and Lunch Sponsors will each receive 4 tickets, Break Sponsors will receive 3 tickets, and T-shirt Sponsors will receive 2 tickets. Tickets will be distributed at the registration table upon arrival Thursday morning.

Hotel Accommodations

The Hawthorn Suites has reserved a block of rooms listed under the PHIA Roundtable Conference. They are discounted to \$99 per night, plus applicable taxes. Please call the hotel for reservations by September 14th (502-899-5959 or toll free 866-899-5959).

For exhibitor booth payment make checks payable to **PHIA**, and mail to: **4010 Dupont Circle, Suite 418, Louisville, KY 40207**
Credit Card payments can be faxed to 502.473.8807 or emailed to Sherry@phia.com with application.

Check #: _____ MC / VISA / Discover Card #: _____
(circle one)
Expiration Date: _____ 3 digit security code (on back of card): _____
Amount to be charged: _____
Name on Card: _____
Address for Card holder (if different from above) including zip _____
Authorized Signature _____