

# NORTHWEST ACADEMY OF OTOLARYNGOLOGY

## 2019 WINTER CONFERENCE

JANUARY 11-13, 2019  
HILTON  
WHISTLER, BC

### EXHIBITOR AGREEMENT

COMPANY NAME \_\_\_\_\_

PRIMARY CONTACT \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

PRIMARY BOOTH REPRESENTATIVE CONTACT (This information will be published and distributed to attendees)

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

#### REPRESENTATIVES STAFFING YOUR BOOTH

1) \_\_\_\_\_ 2) \_\_\_\_\_

*Two allowed, additional representatives \$150 each*

3) \_\_\_\_\_ 4) \_\_\_\_\_

PRODUCT/ SERVICE TO BE DISPLAYED: \_\_\_\_\_

PLEASE INDICATE COMPANIES YOU DESIRE NOT TO BE LOCATED ADJACENT TO (I.E. COMPETITOR):

1) \_\_\_\_\_ 2) \_\_\_\_\_

THE SIGNATURE BELOW SIGNIFIES THAT THE COMPANY REPRESENTATIVE HAS READ AND AGREES TO ABIDE BY ALL NWA O EXHIBIT PRACTICES AND REGULATIONS (SEE ENCLOSED)

Signature \_\_\_\_\_ Title \_\_\_\_\_

**EXHIBIT SPACE:** Exhibit space will be assigned based on level of sponsorship, exhibit location purchased, followed by first come basis.

STANDARD BOOTH (6' TABLE TOP) # OF BOOTHS \_\_\_\_\_ @ \$2,000.00 EA \_\_\_\_\_

TICKET FOR ADDITIONAL REPRESENTATIVE # OF REPS \_\_\_\_\_ @ \$ 150.00 EA \_\_\_\_\_

TOTAL AMOUNT ENCLOSED \_\_\_\_\_

CHECK HERE FOR INFORMATION REGARDING OPPORTUNITIES TO SUPPORT THIS ACTIVITY THROUGH A FINANCIAL OR IN-KIND GRANT.

CHECK ENCLOSED  CREDIT CARD PAYMENT

Credit Card payments may be made online through Paypal using the link below.

<http://nwao.org/2019-winter-conference-exhibitor-agreement/>

RETURN THIS FORM WITH PAYMENT TO NWA O (TAX ID #91-1066428)  
NWA O, 2001 Sixth Ave, Suite 2700, Seattle, WA 98121