

**North Carolina Foot & Ankle Society and Foot
Winter Scientific Seminar • January 14 –17, 2010
Sheraton Imperial Hotel ♦ Durham, North Carolina**

Exhibit and Sponsor Registration

Company Name: _____
 Contact Person: _____
 Address: _____ Email: _____
 City: _____ Phone: _____
 State/Zip: _____ Fax: _____
 Describe your product or service _____

Please complete the following information.

√		Exhibit/Sponsor Fee Before 12/15/09	Exhibit/Sponsor Fee After 12/15/09	Total
<input type="checkbox"/>	EXHIBIT ONLY (single space)	\$900.00	\$1000.00	
<input type="checkbox"/>	EXHIBIT ONLY (double space)	\$1800.00	\$2000.00	
<input type="checkbox"/>	EXHIBIT AND REGISTRATION PACKET INSERT	\$1150.00	\$1250.00	
<input type="checkbox"/>	SPONSORING SPEAKER	Contact Seminar Chair; Submit required forms.		
#	ADDITIONAL REPRESENTATIVES		\$225.00 each	
#	Electrical Outlets		\$50.00	

TOTAL DUE _____

Booth Choices:

List names of all attending representatives. Exhibit fee of \$900.00 includes one representative. Additional representatives may attend at a cost of \$225.00 per person, regardless of the duration of their attendance.

Payment Information:

Check number _____ in the amount of \$_____ is enclosed.
 Charge the credit card listed below. Note that all charges will appear to "Upton Associates."
 Visa MasterCard Discover American Express

Card number: _____ Expiration: _____
 Cardholder Signature: _____ Security Code: _____

No refunds will be processed after December 15, 2009. Requests made before December 15 will incur \$100.00 processing fee.

Complete this form and return with payment by December 15, 2009, to: North Carolina Foot & Ankle Society
 Post Office Drawer 40399
 Raleigh NC 27629-0399

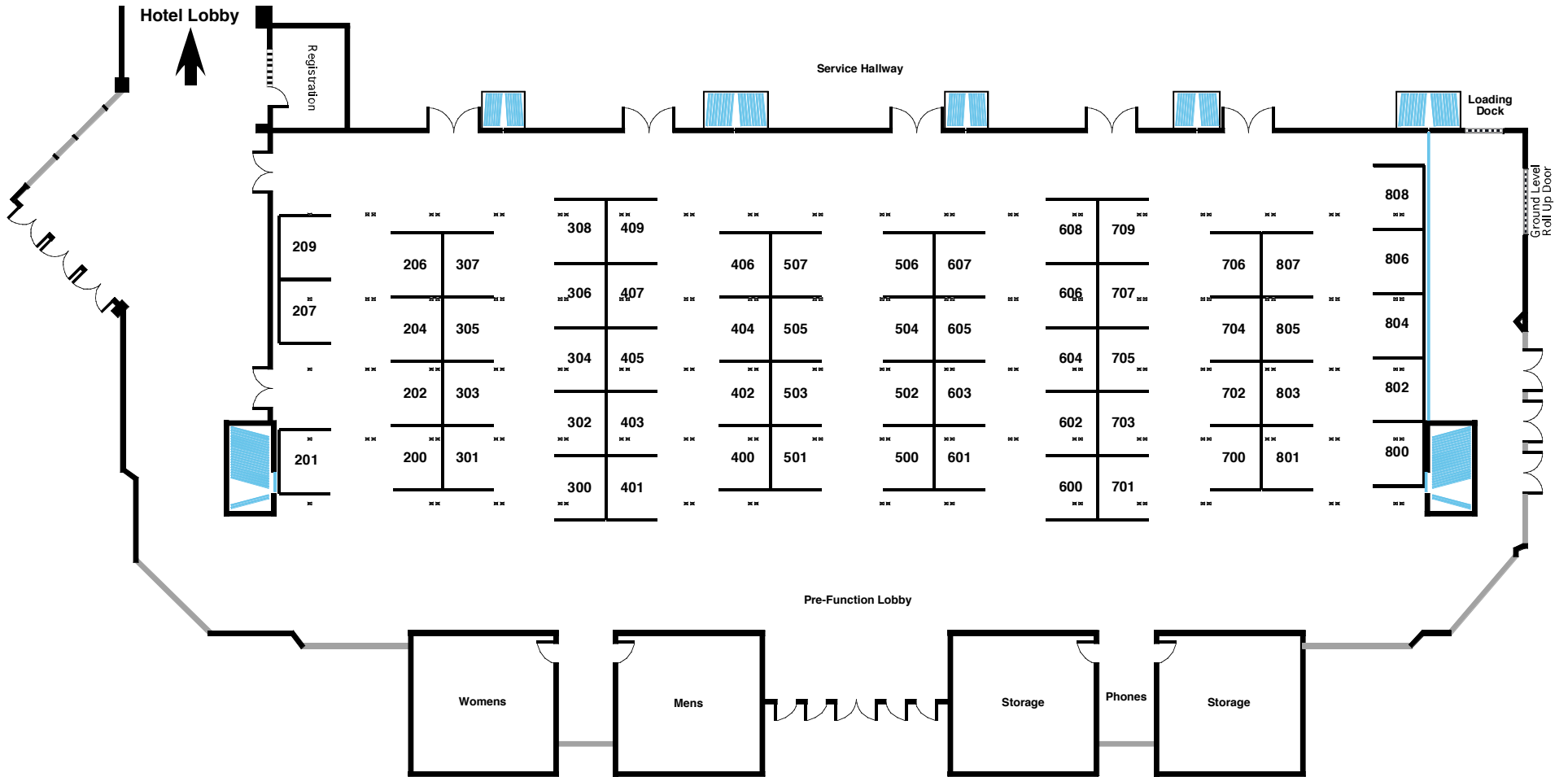
If paying by credit card, complete and fax to (919) 872-1598.

For additional information, contact the Society office at (919) 872-2224 or contact@ncfootandankle.org.

Information regarding shipping and package handling will be forwarded to the contact person identified above at a later date.

Make sleeping room reservations at the Sheraton Imperial Hotel by calling 919/941-5050, until December 15, 2009.

By completion and return of the Exhibit Contract & Sponsor Registration Form to the North Carolina Foot & Ankle Society, you agree to adhere to the rules and regulations as outlined. Failure to conform or comply could result in financial penalty or jeopardize invitations to future programs.	Total Due:
	Payment:
	Balance:



HOLLINS Exposition Services

PO Box 49837
Greensboro, NC 27419
(336) 315-5225

LEGEND:
Electrical Floor Box: x

<p><i>Use or reproduction of this drawing without the express written permission of Hollins Exposition Services is strictly prohibited.</i></p>	<p>Imperial Ballroom 60 - 10' X 8' Booths</p>	<p>NC FOOT & ANKLE SOCIETY WINTER SCIENTIFIC SEMINAR January 13 - 16, 2009</p>	<p>Sheraton Imperial Hotel & Convention Center Research Triangle Park, NC</p>	<p>Revised: 09/11/09</p>
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