



# ACUA 2018 ANNUAL CONFERENCE

## BOOTH REPRESENTATIVE FORM

Please return no later than **Monday, August 20, 2018** to register your representatives.  
*Forms will not be pre-processed after August 20.*  
**All representatives must register on-site after the deadline.**

***This document is a fillable form – to prevent errors during the data entry and name badge creation process, all forms must be typed and not handwritten.***

Company Name: \_\_\_\_\_

Pre-Show Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

On-Site Contact Name: \_\_\_\_\_ Cell: \_\_\_\_\_

On-Site Contact Email: \_\_\_\_\_

**Each booth receives one complimentary booth representative with complimentary conference registration included.** To receive the complimentary registration all items under the complimentary registration section must be completed on this form and returned to the executive office by August 20.

*Please list representative information exactly as you would like it printed on your exhibit badges:*

**COMPLIMENTARY REGISTRATION**

Name: \_\_\_\_\_ Preferred First Name for Badge: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

ACUA fully complies with the legal requirements of the ADA and the rules and regulations thereof. Please specify any special needs or dietary restrictions:

Vegetarian    Vegan    Gluten Free Diet    Diabetic    Kosher    Gluten Free Allergy    Other: \_\_\_\_\_

Choose only one track per session (see session matrix and write in number/letter code on the corresponding line below):

Session 1: \_\_\_\_ Session 2: \_\_\_\_ Session 3: \_\_\_\_ Session 4: \_\_\_\_ Session 5: \_\_\_\_ Session 6: \_\_\_\_ Session 7: \_\_\_\_ Session 8: \_\_\_\_  
 Session 9: \_\_\_\_ Session 10: \_\_\_\_

Please indicate which events you will be attending:

Sunday Opening Reception    Wednesday Evening Event

**Additional Booth Representative Badges may be purchased for an additional \$150 per badge.** Each additional badge includes Opening Reception food and (2) drink tickets, breakfasts and breaks on exhibition days and Monday lunch. Additional badges do not include dinners, Wednesday - Thursday food events, Wednesday off-site event or entrance to educational sessions. *Any additional exhibitor wishing to attend educational sessions must register through the general registration process used by conference participants.*

**ADDITIONAL BOOTH REPRESENTATIVE BADGES**

Please list your representatives below:

Booth Representative Name	City, State	Email	Cost
<b>TOTAL TO BE PAID:</b>			<b>\$ _____</b>

*If additional space is needed, please attach an additional document to this form.*

**Method of Payment:**

MasterCard    Visa    American Express    Discover    Check (# \_\_\_\_\_)

Card Number: \_\_\_\_\_ Expiration Date (MM/YY): \_\_\_\_ / \_\_\_\_ Cardholder Phone: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_

Please Email Receipt To: \_\_\_\_\_