



WSOA 2021 ANNUAL MEETING

DEC. 4, THE CHARTER HOTEL, SEATTLE

EXHIBITOR AGREEMENT

COMPANY NAME _____

PRIMARY CONTACT _____ TITLE _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ E-MAIL _____

PRIMARY BOOTH REPRESENTATIVE (ONSITE CONTACT)

NAME _____ TITLE _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ E-MAIL _____

COMPANY WEBSITE _____

REPRESENTATIVES STAFFING YOUR BOOTH (INCLUDED 2 REPS) EXTRA REPS \$125 EACH

1) _____ 2) _____

PRODUCT/ SERVICE TO BE DISPLAYED: _____

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

1) _____ 2) _____

SIGNATURE _____ TITLE _____

PLATINUM OPPORTUNITY (ATTACH ENCLOSED FORM) AMOUNT _____

TABLETOP DISPLAY # OF BOOTHS _____ @ \$ 1395.00 EA _____

EXTRA REPS # OF REPS _____ @ \$ 125.00 EA _____

TOTAL AMOUNT ENCLOSED _____

WOULD YOU LIKE LUNCH ON SATURDAY? HOW MANY?

___ GLUTEN FREE ___ VEGETARIAN ___ VEGAN ___ DAIRY FREE ___ NO RESTRICTIONS

CHECK ENCLOSED

CREDIT CARD PAYMENT: PLEASE REGISTER ONLINE FOR ALL CREDIT CARD PAYMENTS WWW.WSOAONLINE.ORG

RETURN THIS FORM WITH PAYMENT TO WSOA

NEW ADDRESS***PO BOX 13042 Olympia WA 98508*** NEW ADDRESS

If paying by Credit Card you may register/pay online at www.wsoaonline.org