

# Vendor Registration Form



## 2009/2010 NDAHC Educational Meetings

- April 13-14, 2009, Comfort Inn, Bismarck, ND

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

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

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

YES, I will be exhibiting: \_\_\_\_\_ NO, I will not be exhibiting: \_\_\_\_\_

DATE(s) of exhibiting: \_\_\_\_\_

YES, I will sponsor a meeting event: \_\_\_ Break (\$300) \_\_\_ Lunch (\$500)

Special accommodations for exhibiting?: \_\_\_\_\_

Please remit check in the amount of \$250 with registration form (\$150 for NDAHC Associate Members). If your company is sponsoring a break or lunch, the exhibit fee is waived. Make check payable to NDAHC. Mail or fax registration form to: NDAHC, PO Box 2175, Bismarck, ND 58502-2175 (fax) 701-224-9824

If you have special payment circumstances, please indicate this on your registration form.

If you have questions or would like additional information, please contact Erica Cermak @ 701-224-1815, or e-mail at: [erica@aptnd.com](mailto:erica@aptnd.com)