

Important Notice: Opportunity to Register Early for Fall Conference

CA-NV-AWWA 2004 Annual Fall Conference • Sacramento, CA

Application for Exhibit Booth Space • October 12-15, 2004



Exhibitors: Register early to receive the best locations, at the best rate. This application is a preview for Fall Conference. Exhibitors that use this form will have first choice for locations in the Exhibit Hall at Fall Conference. Location selection will be available on August 1, 2004. So register early to receive the best locations, at the best rate!

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_
Company Name: \_\_\_\_\_ Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

AWWA Organizational Member\*: [ ] Yes Membership#: \_\_\_\_\_ [ ] No [ ] Check here for more information about becoming a member
\*Individual AWWA membership does not qualify for the member rate.

Complimentary Exhibit Personnel (2 per booth): \_\_\_\_\_

Additional Exhibit Personnel:

Early Registration Rates (before August 13th) - \$30/person: \_\_\_\_\_

Pre-Registration Rates (before September 17th) - \$40/person: \_\_\_\_\_

Onsite Registration Rates (on or after September 17th) - \$50/person: \_\_\_\_\_

Companies from whom you desire separation (separation not guaranteed): \_\_\_\_\_

Electricity: You may order electricity with this form, but it must be requested in advance. Electrical orders cannot be placed on-site.

[ ] Check here if you would like electrical hook-ups. The fee is \$100 per booth and is 120v@20AMPS.

Exhibit Booth Rates:

Booth Early Registration Rates (before August 13th): [ ] \$995 AWWA Organizational Members [ ] \$1,100 Non-Members

Booth Pre-Registration Rates (before September 17th): [ ] \$1,195 AWWA Organizational Members [ ] \$1,250 Non-Members

Booth Onsite Registration Rates (on or after September 17th): [ ] \$1,250 AWWA Organizational Members [ ] \$1,500 Non-Members

Pre-Conference Attendee List: [ ] Disk (\$25) [ ] CD (\$30) [ ] Print (\$35)

Will be mailed 2 weeks prior to conference.

Post-Conference Attendee List: [ ] Disk (\$30) [ ] CD (\$30) [ ] Print (\$35)

Annual Fall Conference Dinner: \$75 per person
Include total fees and payment information below

Office Use ONLY: Order # Received In: \_\_\_\_\_

Golf Tournament Registration Form

Entry Fee: \$100 per person Entry Deadline: Oct. 1, 2004
Include total fees and payment information to the right

Golfer: \_\_\_\_\_

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

Golfer: \_\_\_\_\_

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

Golfer: \_\_\_\_\_

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

Golfer: \_\_\_\_\_

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

Onsite Program Advertising:

Cost for onsite programs: (For additional information see page 5)

[ ] Inside Front Cover: 4.5" x 8.5" - \$500 [ ] Full Page: 4.5" x 8.5" - \$225

[ ] Inside Back Cover: 4.5" x 8.5" - \$350 [ ] Business Card: 3.5" x 2" - \$100

Please read the following carefully and sign below

Our company and its representatives hereby agree to:
Abide by all the "Rules and Regulations," as stated in the exhibitor prospectus on pages 7 & 8. Payment must be received in full upon submission of application.
Application submitted without payment will not be assigned a booth until payment is received.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Sponsorship Request

Please make your selection from the list of opportunities below.

[ ] Conference Dinner: \$1,000

[ ] Keynote Luncheon: \$250

[ ] Hospitality Suite Program Listing: \$100

[ ] Workshops: \$250

[ ] Technical Tour: \$250

[ ] Technical Session: \$250

[ ] Golf Tournament:

[ ] Hole: \$150

[ ] Prizes: Your Choice

Payment Information

Price Per Booth: \_\_\_\_\_

Booth Total: \_\_\_\_\_

Personnel Total: \_\_\_\_\_

Electrical Total: \_\_\_\_\_

Attendee List Total: \_\_\_\_\_

Onsite Program Ad Total: \_\_\_\_\_

Sponsorship Total: \_\_\_\_\_

Annual Dinner: \_\_\_\_\_

Golf Total: \_\_\_\_\_

Total Amount Due: \_\_\_\_\_

Payment Method

(Make check payable, in U.S. funds, to CA-NV-AWWA)

[ ] Personal Check [ ] Co. Check Amt. \$ \_\_\_\_\_

Credit Card: [ ] Visa [ ] MC [ ] AMEX

Signature: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card No.: \_\_\_\_\_ V-Code: \_\_\_\_\_
(Last 3 digits on back of card)

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_
(Must be address in which your credit card statement is mailed)