



Exhibitor Passport Form

Organization:					
Address:					
City:		ST:		Zip:	
Contact Name:			Phone:		
Email:					

Exhibit Hall Passport Details:

As a participant of the 2017 Exhibit Hall Passport, your company can join in the fun while greatly increasing your booth traffic. Attendees will visit supporting booths to have their passport stamped for a chance to win a prize.

DEADLINES:

- July 1st – Ad Commitment/Materials Due
- July 15th – Payment Due

ADVERTISING INCLUDES: Corporate logo or name recognition on the Exhibit Hall Passport. (Include a vector file for a logo)

ADVERTISING RATE: \$1,500
(Limited to 12 participants)

Print Name: _____

Signature: _____

Date: _____

Payment Terms: Sponsors will be billed immediately upon receipt of signed form. All payments are due no later than July 15, 2017. (Please contact the AANA Finance Department regarding credit card payments.)

Please return completed form to:

Wendy Stoner
 American Association of Nurse Anesthetists
 222 S. Prospect Ave.
 Park Ridge, IL 60068
 Phone: 847-655-1109
 Email: wstoner@aana.com