

WPASGL QC2017 EXHIBITORS/SPONSORS REGISTRATION

Please Mail or Email this Form to address at bottom.

2 ATTENDEES - "FOR PROFITS"

1 ATTENDEE - "NON PROFITS"

Additional Conference Attendees must complete the attendee registration form and pay the standard registration fee.

Company Name:		Website:
Contact Person #1:	Contact Person #2:	
Address:	Address:	
City/State/Zip:	City/State/Zip:	
Phone:	Phone:	
Email:	Email:	
Attending: <input type="checkbox"/> Thursday & Friday <input type="checkbox"/> Friday Breakfast <input type="checkbox"/> Friday Lunch	Attending: <input type="checkbox"/> Thursday & Friday <input type="checkbox"/> Friday Breakfast <input type="checkbox"/> Friday Lunch	

Do you have your own exhibit display?

Will you also need a table? (All Tables are 6 feet)

Will you need access to an electrical outlet?

Please describe (in a few paragraphs below) your company and product(s) and/or service(s): (Use additional sheet if necessary)

"For Profit" Exhibitor Fee: \$1,000.00

"Non Profit" Exhibitor Fee: \$500.00

Make Check Payable To WPASGL

Mailing Address:
 WPASGL
 c/o Linda Smith
 62 Waterfront Drive
 Pittsburgh, PA 15222-4734
 Email: wpasgl@aol.com
 (412) 480-9985