Washington Association of Health Underwriters'



2017 Spring Symposium

March 22 Seattle • March 23 Spokane

Exhibitor Registration Form

Company Name (as it should appear)			
Contact Email Address			
Address			
First Representative			
First Rep Email WAOIC #			
Second Representative			
Second Rep Email			
We will participate in the "GiveawaWe have emailed our jpg/pdf logo			
EXHIBITOR TABLE REGISTRATION	<u>OPTIONS</u>		
	to two individual registrations for the conference. dance.) Parking validated for 2 registrants in Seatt		
Seattle and Spokane - \$995 Seattle only - \$700 Spokane only - \$700 Seattle Breakfast Sponsor - \$1550 Spokane Breakfast Sponsor - \$1250 ADDITIONAL PARTICIPATION AN	Includes 2 registrants and 1 6' table each location Includes 2 registrants and 1 6' table	\$ =	
Coffee Break Sponsors Seattle - \$500 Coffee Break Sponsors Spokane - \$5	Morning OR Afternoon ← Please circle one	\$	
PRINTED PROGRAM ADVERTISING			
Full Page Advertising in Program HanHalf Page Advertising in Program HarAds should be black and white, came	ndout - \$175 Submit size no larger than 4½ w x 3½ h		
Payment by Credit Card (PayPa	ble to WAHU (Be sure to include check with this reginal Invoice will be emailed to your Contact Email Address) posium, PO Box 58530, Seattle, WA 98138-1530		n)

Email wahu@asi-seattle.net | Phone 206-623-8632

Please submit your completed WAHU Exhibitor Registration form <u>with payment</u> by March 8, 2017 to reserve your booth and additional participation

Payment by Check (made payable to WAHU)

Mail completed registration form with check to: WAHU 2017 Spring Symposium PO Box 58530, Seattle, WA 98138-1530

We will email a receipt to your Contact Email Address

Payment by Credit Card (Visa, MasterCard or American Express)

Mail or email completed registration form to:

WAHU 2017 Spring Symposium

Email wahu@asi-seattle.net

PO Box 58530, Seattle, WA 98138-1530

We will email a PayPal Invoice to your Contact Email Address

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V V I	iat S III it I OI Tou:
	As an exhibitor you will be able to meet with the leading Health Insurance professionals from around the State as well as from Oregon and Idaho.
	In addition to your booth you receive a copy of the list of attendees and participate in the day's activities, lunch and continuing education.
	Breakfast, Breaks and Lunch are held close to or in the exhibit room, drawing attendees to the booth exhibits throughout the day.
Tir	me:
	7:30AM to 4:30PM (Set up for Exhibitors begins at 6:30AM)
WI	nere & When
	Seattle – Wednesday, March 22, 2017 Hilton Seattle Airport & Conference Center; 17620 International Blvd, Seattle, WA
	Spokane – Thursday, March 23, 2017 Lincoln Center, 1316 N. Lincoln St. (1 block N of Boone), free onsite parking
De	adline
	Exhibitor registration submission due by March 8 deadline or when sold out. (We did sell out last year) No cancellations or refunds after deadline.
Go	ood to Knows
	Booth assignment will be based on when we receive your Paid Exhibitor Registration
	Breakfast, Lunch and coffee breaks are included in registration fee for attendees.
	All exhibitors can have two registrants and two prepaid parking spots included with their registration fee.
	Exhibitors who are offering "Giveaway Gift Drawings" are asked to focus on Health & Wellness and offer a minimum value of \$50.
Qι	estions

☐ Please contact WAHU at (206) 623-8632 or <u>wahu@asi-seattle.net</u>, <u>wahu-online.org</u>.