

# EXHIBITOR AND/OR SINGLE DAY A LA CARTE MEAL REGISTRATION (FOR EXHIBITORS NOT ATTENDING EDUCATION)

Attach your completed Hotel Reservation Form to this form, and submit both to ISPE. This form may be photocopied to register additional people.

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**Please type or print clearly.** ISPE ID # \_\_\_\_\_ Check here  if you were previously an ISPE Member.

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Informal Badge Name \_\_\_\_\_ Chapter/Affiliate \_\_\_\_\_

Job Title \_\_\_\_\_ Company \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip+4/Postcode \_\_\_\_\_ Country \_\_\_\_\_

Business Tel \_\_\_\_\_ Business Fax \_\_\_\_\_

Emergency Phone \_\_\_\_\_ (Cell/home phone for last minute meeting updates) E-mail Address \_\_\_\_\_

- I wish to keep my data confidential and it is given only for use by ISPE and its local Chapters and Affiliates.
- I do not wish my information to be printed in the Membership Directory or on Conference Attendee Listings.
- I grant ISPE permission to record and/or copy my image and/or voice, and I grant ISPE all rights to use these sound, still, or moving images in any medium for education, outreach, promotional, or archival activities and other purposes of trade without limitation and/or compensation.
- I'm a first-time ISPE Annual Meeting attendee.

## EXHIBIT HALL ACCESS ONLY (Walk-Through Pass)

Those not registered as Annual Meeting delegates, exhibitors, or spouses/guests, who wish to obtain access to the Exhibit Hall may purchase a walk-through pass. Please register for a la carte meals below.

	Member/Nonmember
<input type="checkbox"/> Exhibit Walk-Through Pass - All Days (Sunday to Tuesday)	US\$130/US\$260
<input type="checkbox"/> Exhibit Walk-Through Pass - Sunday	US\$50/US\$100
<input type="checkbox"/> Exhibit Walk-Through Pass - Monday	US\$50/US\$100
<input type="checkbox"/> Exhibit Walk-Through Pass - Tuesday	US\$30/US\$60

## A LA CARTE MEAL FUNCTIONS (not included in your badge fee)

Single day passes include continental breakfast, lunch, and breaks for that day; tickets to evening events, the Monday lunch, and the Tuesday lunch must be purchased a la carte. To ensure that we arrange for a sufficient number of meals, please check those functions you will attend.

<input type="checkbox"/> I will NOT attend any meals, receptions, Monday Luncheon, or parties	
<input type="checkbox"/> Monday Luncheon*	\$45
<input type="checkbox"/> Monday Night Reception - Margaritaville	\$115
<input type="checkbox"/> Tuesday Membership Luncheon & Awards Ceremony*	\$55
<input type="checkbox"/> Tuesday Night Party - Roman Festival	\$195
<input type="checkbox"/> Wednesday Light Lunch*	\$35

\*Special Meal Requirement  Kosher  Vegetarian  Gluten Free

## EXHIBITOR BADGES

Registration forms will be sent to confirmed exhibitors. Please contact ISPE customer service with any questions at [customerservice@ispe.org](mailto:customerservice@ispe.org).

## PAYMENT METHOD

Registrations only accepted with payment or credit card information. Please contact ISPE regarding wire transfers.

- Check # \_\_\_\_\_ enclosed payable to ISPE (must be in US Dollars, drawn on a US bank) in the amount of \$ \_\_\_\_\_  
Note: Make hotel deposit payable to **Caesars Palace**.

- Bill My Credit Card - circle type:

VISA MASTERCARD/EUROCARD AMEX

\_\_\_\_\_  
CARD NUMBER EXPIRATION DATE

\_\_\_\_\_  
NAME OF CARDHOLDER (AS IT APPEARS ON CARD)

\_\_\_\_\_  
CARDHOLDER SIGNATURE

- I will not be staying at Caesars Palace. I will be staying at the \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

**Cancellations must be made in writing.  
No refunds after 12 October 2007.**

Please send Annual Meeting registration and hotel reservation forms with payment to: ISPE Headquarters  
3109 W. Dr. Martin Luther King, Jr. Blvd., Suite 250  
Tampa, Florida 33607, USA  
Tel: + 1-813-960-2105, Fax: +1-813-264-2816  
[www.ispe.org](http://www.ispe.org) - FEI #59-2009272