EXHIBITOR REGISTRATION FORM

SPRING CONFERENCE 2019

March 25-28 2019

Sac	ram	ner	nto,	CA

Primary Company Contact

Company Name

Address

City/State/Zip

Phone Number

Email Address

AWWA Service Provider/Utility Organization Member Number

Selected Booth Number(s)

____ 3rd:____ Choices: 1st:_____ 2nd:_____ 3rd:_____ Refer to the Exhibitor floor plan to select your booth(s)

Booth registration includes two (2) complimentary exhibit personnel registrations with Wednesday lunch tickets, one (1) 10' x 10' booth with pipe and drape, one (1) 4' table, two (2) chairs and one (1) waste basket and a pre and post attendee mailing list.

Additional information regarding ordering electrical, WiFi, etc. will be emailed to the primary contact after full payment is processed.

IMPORTANT: Carpet cost is included in booth purchase. Carpet is required.

Exhibitors are limited to only four representatives (2 complimentary + 2 additional fee) in the booth. Up to two additional personnel registrations are available for purchase for a fee of \$125 Member/ \$135 Non Member.

List the names and email addresses of your onsite representatives (First two listed will receive the complimentary personnel registrations):

List even if the same as the Primary Company Contact abov	۰.	
		t even if the same as the Primary Company Contact above.
2	2.	

Additional Personnel

3. _____

1



American Water Works Association California-Nevada Section

PRE-REGISTRATION

Reserved and paid on or before February 24, 2019

□ AWWA Service Provider or Utility Organization Member (\$1,565 per booth) _____ x \$1,565= \$_____

□ Non Member Exhibitor (\$1,865 per booth) _____ x \$1,865 = \$____

ONSITE REGISTRATION

Reserved and paid after Fedruary 24, 2019

- □ AWWA Service Provider or Utility Organization Member (\$1,865 per booth) _____ x \$1,865 = \$_____
- □ Non Member Exhibitor (\$2,165 per booth) _____ x \$2,165 = \$_____

ADDITIONAL BOOTH PERSONNEL

□ Member Rate _____ x \$125 = \$_____

□ Non Member Rate ______ x \$135 = \$_____

ADDITIONAL CONTRIBUTIONS/SUPPORT

= \$ □ Prize Drawing _____ x \$50

□ Additional Company Name Listing in Program Company Name: _____

_____x \$100 = \$

Think Proxi Beacon \$300

Mobile App - Sponsor a Session Push Notification \$200 Mobile App - Logo \$50

Mobile App Sponsor a Session logo \$50

Mobile App - Sponsor a Speaker \$50

Beacon for Lead Retrieval \$100

***TOTAL AMOUNT ENCLOSED** = **\$**

PAYMENT INFORMATION

Select payment type

□ Check Payable to CA-NV Section, AWWA (U.S. funds)

 $\square PO#$

Must be accompanied by a physical copy of the PO

Credit Card:
□ Visa □ Mastercard □ American Express

Card No.

EXP Date: ______ Billing Zip Code: _____

Name on Card: ______

Authorized Signature: _____

For a receipt, please provide your email address below:

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 online in the Exhibitor Rules and Regulations. Payment must be received within 30 days of reserving your booth. Payments not received in full will not be guaranteed a booth. Refund requests must be submitted in writing to the Section Office by February 24, 2019. A \$50 administrative fee will be deducted from all refunds. No refunds will be granted after February 24, 2019.

Signature:	Date:
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Print Name:	Title:

Email all registration forms and credit card payments to schickarmane@ca-nv-awwa.org or fax to 909-291-2107 or mail with check to CA-NV Section, AWWA, 10435 Ashford Street, Rancho Cucamonga, CA 91730