



## Exhibit Registration Form

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Name of Person Staffing Booth if different from Contact Name above: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Brief description of organization and purpose of exhibits:  
 \_\_\_\_\_  
 \_\_\_\_\_

### Fees

Exhibit booth \$1000.00	<b>ADVERTISING (Submission deadline November 24) in Conference Handbook (limited)</b>		
8' x 10' Drapery Booth	<input type="checkbox"/>	Inside Full Page	\$1720
One 6' Skirted Table	<input type="checkbox"/>	2/3 Page	\$1147
Two Chairs	<input type="checkbox"/>	1/2 Page	\$860
One Wastebasket	<input type="checkbox"/>	1/3 Page (vertical)	\$573
One Power Outlet	<input type="checkbox"/>	1/4 Page (vertical)	\$430
	<input type="checkbox"/>	1/4 Page (horizontal)	\$430
	<input type="checkbox"/>	1/6 Page	\$303
	<input type="checkbox"/>	1/12 Page	\$166

Please check all that apply:

I require:     Exhibit booth         Advertising

**Method of Payment:**    Visa    Mastercard    Amex    Cheque

**Name as it appears on the card:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_ **Expiry:** \_\_\_\_\_

**3 digit code (CVV)** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Please return this registration form, along with the appropriate fee to:**

Colleen Stuckless 2450 Milltower Court, Mississauga, ON L5N 5Z6  
 Email: [cstuckless@paoc.org](mailto:cstuckless@paoc.org) Phone: 905-542-7400 Fax: 905-542-7313  
 (Make payments payable to: *THE PENTECOSTAL ASSEMBLIES OF CANADA*)