

RETURN FORM AND PAYMENT TO:
Carol Lessard
Mines and Aggregates Safety and Health Association
690 McKeown Avenue
North Bay, ON P1B 9P1
TELEPHONE: 705-474-7233 FAX: 705-472-5800

MASHA CONFERENCE April 21th, 2010 EXHIBITOR REGISTRATION

Company: _____

Address: _____

Website Address: _____

Our Display Features: _____

Contact Name: _____

Telephone: _____ E-mail: _____

Exhibit Personnel Names (for name tags, please print clearly)

1. _____

2. _____

3. _____

4. _____

Door Prize(s) _____

Exhibit Price: ___ Standard 5'X10' unit(s) (spaces 1 to 20) @ \$410 each (plus 5% GST = \$430.50)

___ Central unit(s) (spaces 21 to 24) @ \$440 each (plus 5% GST = \$462.00)

Special Needs: 110 volt power (Y/N)? _____ Other? _____

Reduced Rate Conference Registrations Requested: ___ @ \$200 each (plus 5% GST = \$210)

Name: _____

Name: _____

Form of payment:

Visa or Master Card

Cheque (Payable to Mines & Aggregates Safety & Health Association)

Name on Card (*please print clearly*): _____

Card #: _____ Expiry Date: _____

Card Holder Signature: _____

Note: Registration is accepted upon receipt of payment.