



76th ANNUAL FAR WEST SKI ASSOCIATION CONVENTION  
June 5th – June 8th, 2008, Bellevue, Washington

## EXHIBITOR / ATTENDEE CONFIRMATION



**PLEASE RETURN THIS FORM NO LATER THAN APRIL 30<sup>th</sup>, 2008**

**EXHIBITOR SILENT AUCTION BOOTHS:** Booth space is an **8' x 8' Space** with a table and 2 chairs.

**ELECTRICITY AND BANNER HANGING:** I will need an electrical outlet Yes \_\_\_\_\_ No \_\_\_\_\_  
I will bring a banner to be hung Yes \_\_\_\_\_ No \_\_\_\_\_

*\$30 charge for electricity and \$30 charge for hanging banners (except for event sponsors).  
Please use **Optional Events Form (attached)** when submitting payment(s) for electricity or banner hanging.*

**REPRESENTATIVE(S) ATTENDING THE CONVENTION:** (2) **Two complimentary registration packets are provided for each booth.** Registration packets contain coupons for Convention activities, Saturday continental breakfast and luncheon. Should you wish to attend the Saturday Evening Awards Banquet, there is a charge of \$32.50 (50% of meal cost). Coupons will **ONLY BE PROVIDED** for those representatives responding below that they will be attending meals. *IF MORE THAN 2 representatives are attending, please duplicate this form and complete with names and attach a check payable to **FWSA** with \$30 for lunch and \$65 for the Awards Banquet.*

*Please use **Optional Events Form (attached)** when submitting payment(s) for meals.*

Complete information below or simply attach your business card(s) for contact information.

**1) NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

Street City Zip

**PHONE:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **WEBSITE:** \_\_\_\_\_

**ATTENDING SATURDAY LUNCHEON:** Yes \_\_\_\_\_ No \_\_\_\_\_

**ATTENDING SATURDAY BANQUET:** Yes \_\_\_\_\_ No \_\_\_\_\_ (If Yes, please complete Optional Events Form)

I have made my hotel reservations @ \_\_\_\_\_ (Name of Hotel)

**2) NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

Street City Zip

**PHONE:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **WEBSITE:** \_\_\_\_\_

**ATTENDING SATURDAY LUNCHEON:** Yes \_\_\_\_\_ No \_\_\_\_\_

**ATTENDING SATURDAY BANQUET:** Yes \_\_\_\_\_ No \_\_\_\_\_ (If Yes, please complete Optional Events Form)

I have made my hotel reservations @ \_\_\_\_\_ (Name of Hotel)

**RETURN:** **Debbi Kor, PO Box 3887, Wilsonville, OR 97070. 503.682.1563. [fwsadebbi@aol.com](mailto:fwsadebbi@aol.com)**