



Western Occupational Health Conference 2010
September 30 – October 2, 2010
Occupational & Environmental Health: Navigating into the New Decade
Newport Beach Marriott Hotel & Spa, Newport Beach

EXHIBITOR REGISTRATION

Company: _____

Contact: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

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PAYMENT INFORMATION

- \$900 per exhibit space **(includes 2 reps)**
- \$550 additional booth representative
- \$100 wired Internet access
- \$50 post July 31, 2010 late fee
- \$50 electrical charge

TOTAL ENCLOSED: \$ _____

Check payable to WOHC (Federal Tax ID #77-0053453) VISA/MC/AMEX

Card#: _____ Exp: _____

Signature: _____

There will be a 50% cancellation fee for cancellations received before July 31, 2010, and no refunds thereafter.

Please contact me with details on sponsorship.

RETURN REGISTRATION FORM TO:
Western Occupational Health Conference
575 Market Street, Suite 2125
San Francisco, CA 94105

You can contact our office at 415-764-4918 (phone), 415-764-4915 (fax)
or via email at woema@hp-assoc.com.