***Georgia Society for Histotechnology***

***Symposium Exhibit Registration Form***

***Callaway Gardens Lodge & Spa***[***4500 Southern Pine Drive, Pine Mountain GA 31822***](https://www.google.com/maps/place/The+Lodge+and+Spa+at+Callaway+Gardens/@32.8480225,-84.8563677,17z/data=%213m1%214b1%214m2%213m1%211s0x88f3515ee0473d11:0x1ff8332c5887c3c5)

***April 20-22, 2018***

Exhibiting Company Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

*Name, Email & Phone # of Company Administrative Office Contact Person*: REQUIRED

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please List ALL Attending Company Reps and their emails: REQUIRED

**Please print:** Full name and email of all reps attending to ensure accurate name tags. If more space is needed,

please list them on the back:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exhibit Fees: Please check all needs.

$450 \_\_\_\_\_ Unmanned Exhibit Table$400 \_\_\_\_\_ Manned Exhibit Table: This option Includes one table, one power strip, one luncheon ticket, a registration packet with name tags for above listed representatives (please print all), and a final list of attendees the week following the meeting.

$300 \_\_\_\_\_ Additional Table

$35 \_\_\_\_\_ Additional Awards Luncheon Ticket

For additional needs please contact the GSH Exhibit Liaison Mike Bourgeois at [gshpresident@gmail.com](mailto:gshpresident@gmail.com)

Last minute tables, power strips, etc will be the responsibility of the exhibiting company.

Please indicate the amount enclosed for Sponsorship Opportunities:

Speaker Expenses- Please make arrangements directly with the speaker you are sponsoring. Morning Break $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Afternoon Break $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Awards $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PLEASE DESIGNATE WHICH AWARD \_\_\_\_\_\_\_\_\_\_\_\_**

Social $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL AMOUNT ENCLOSED $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Payment options:

1. Make checks payable to GSH and mail along with this completed form to:

**Joyce Weems, GSH Treasurer**

**290 D Winding River Drive**

**Sandy Springs, GA 30350**

2. You may pay by Credit Card by going to [www.paypal.com](http://www.paypal.com) and send funds to the email [gshtreasurer@gmail.com](mailto:gshtreasurer@gmail.com). When paying by this method, you must mail the completed form to the above address or email to [gshtreasurer@gmail.com](mailto:gshtreasurer@gmail.com) in order to be correctly registered. You will receive a receipt via email as soon as both reach the Treasurer.

Please check here if you are paying via PayPal \_\_\_\_\_\_.

Set up is Friday morning, April 20th. The Vendor Reception is at 7p.m. Friday evening. Final breakdown is Sunday, April 22, 2017 at noon. Please make sure your return shipping arrangements are finalized before leaving the facility. Please ship exhibit items to:

**Callaway Resort and Gardens**

**100 Meadow View Lane**

**Pine Mountain, GA 31822**