



Kentucky Workers' Compensation Education Association

2015 Annual Conference | December 10 & 11 | Marriott Louisville East

Exhibitor Registration

Company Name: _____ Contact: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Name of Booth Attendant: _____

EXHIBITOR FEE IS \$600.00. If electric is needed, there will be an extra charge of \$25.00.
Fee includes booth space with 6' table, attendee, breaks, cocktails, breakfast, lunch.

PAYMENT ENCLOSED:	Exhibitor	\$ <u>600.00</u>
	Electric	\$ _____

	Total	\$ _____

**** All Breaks, Breakfast, Cocktail Party will be set up in and around the exhibitor space. ****

Any questions or comments, call Matthew Williams at 502-495-5040 or email matthew.williams@omca.biz.

Check enclosed payable to KWCEA
Mail to: KWCEA
c/o OMCA
2211 Greene Way
Louisville, KY 40220

Ch # _____
Amt \$ _____

Visa **Master Card** **Discover**

Card # _____ Exp Date _____

Card Amt \$ _____

Signature _____

CANCELLATIONS: PLEASE NOTE THERE WILL BE NO REFUND FOR EXHIBITOR FEE IF CANCELLATION IS NOT RECEIVED 30 DAYS PRIOR TO THE EVENT DATE. EXHIBIT SPACE IS ON A FIRST COME BASIS.