



EXHIBIT BOOTH STAFF REGISTRATION FORM

Please type or print clearly. The contact name is the authorized representative for your company.

Attending Not Attending Booth Number: _____ Square Feet: _____

Primary Contact: _____ Title: _____

Organization: _____

Address: _____

City, State, Zip: _____ Country: _____

*Phone: _____ *Fax: _____ E-mail: _____

***Please include country and city code**

Exhibitors receive (2) complimentary booth staff registrations per 100 sq feet. Each additional booth staff is \$50.00 per person.

Complimentary Exhibit Booth Staff

Name _____ **Title:** _____

Organization: _____

Address: _____

Address: _____

City, State, Zip: _____ Country: _____

*Phone: _____ *Fax: _____ Email: _____

***Please include country and city code**

Complimentary Exhibit Booth Staff

Name _____ **Title:** _____

Organization: _____

Address: _____

Address: _____

City, State, Zip: _____ Country: _____

*Phone: _____ *Fax: _____ Email: _____

***Please include country and city code**

Additional Exhibit Booth Staff \$50.00

Exhibitor Delegate Upgrade \$180.00

Name _____ **Title:** _____

Organization: _____

Address: _____

Address: _____

City, State, Zip: _____ Country: _____

*Phone: _____ *Fax: _____ Email: _____

***Please include country and city code**

Fax to: PennWell Registration Department: Direct +1 918 831 9161, Toll-Free (US only): +1 888 299 8057; Email to: registration@pennwell.com





ADDITIONAL EXHIBIT BOOTH STAFF REGISTRATIONS

Additional Exhibit Booth Staff \$50.00
Exhibitor Delegate Upgrade \$180.00

Name _____ **Title:** _____
Organization: _____
Address: _____
Address: _____
City, State, Zip: _____ **Country:** _____
***Phone:** _____ ***Fax:** _____ **Email:** _____
*Please include country and city code

Additional Exhibit Booth Staff \$50.00
Exhibitor Delegate Upgrade \$180.00

Name _____ **Title:** _____
Organization: _____
Address: _____
Address: _____
City, State, Zip: _____ **Country:** _____
***Phone:** _____ ***Fax:** _____ **Email:** _____
*Please include country and city code

Additional Exhibit Booth Staff \$50.00
Exhibitor Delegate Upgrade \$180.00

Name _____ **Title:** _____
Organization: _____
Address: _____
Address: _____
City, State, Zip: _____ **Country:** _____
***Phone:** _____ ***Fax:** _____ **Email:** _____
*Please include country and city code

Total Amount Due \$ _____

Method of Payment:

Check enclosed (in U.S. funds only) - Wire Transfer (Wire information will be provided on invoice)

Credit Card: - Visa - MasterCard - AMEX - Discover

Credit Card Number: _____ Expiration Date: _____

Full Name (as it appears on card): _____

Card Holder Signature: _____ Date: _____

NEED TO REGISTER ADDITIONAL BOOTH STAFF? Copy this form.
Please Fax Completed Form to +1-918-831-9161 or Toll Free 1-888-299-8057
Email completed forms to registration@penwell.com