

WEST VIRGINIA CHIROPRACTIC SOCIETY
FALL MEETING October 14 - 16, 2011
Embassy Suites 300 Court St. Charleston WV

EXHIBIT REGISTRATION APPLICATION

Exhibit Registration (includes one exhibit table).....\$ 300.00
(NOTE: If exhibit extends more than two feet over, please request an additional table)

Additional Exhibit Tables at \$300.00 each\$ _____

Name of Company _____

Street/P.O. Box _____

City, State & Zip _____

Email _____ Phone _____ FAX _____

Name of Representative (s) to be registered for Conference: _____

Number of electrical outlets required for your exhibit: _____

Special Requests: _____

EXHIBITOR REGISTRATION DEADLINE: SEPTEMBER 24, 2011

Hotel Registration deadline: September 22, 2011

For hotel reservations contact Embassy Suites:

1-800-EMBASSY or

304-347-8700 ext 2035 or

online at www.embassysuitecharlestonwv.com

**WVCS reduced room rates of \$114/single, \$124/double,\$134/triple, and \$144/quad
by using group rate code of CRO.**

Please return this form along with your registration fee by October 4, 2011 to:

West Virginia Chiropractic Society

2210 WASHINGTON STREET EAST CHARLESTON WV 25311

TELEPHONE 304-345-9219 800-834-2050 FAX 304-343-4251

WEBSITE - www.wvchiropractic.com