



2008 WALA Spring Conference Exhibitor & Sponsor Registration

April 1-3, 2008

Sponsor Registration Information

(Complete this section if you would like to be a sponsor of the 2008 WALA Conference)

YES, I want to be a SPONSOR at the 13th annual WALA Conference April 2 & 3, 2008 at the Exhibition Hall of the Alliant Energy Center in Madison.

Platinum Package*

Gold Package

Silver Package

Specific Item

Fee

_____	_____
_____	_____

Note – so each item is sponsored only once, the earliest date of receipt with payment confirms sponsorship. Call to see if an item is still available.

*Platinum package includes pre and post attendee lists for one-time marketing.

TOTAL ENCLOSED: \$ _____

Please fill out reverse side of form.

Exhibitor Registration Information

(Complete this section if you would like to be an exhibitor at the 2008 WALA Conference)

YES, I want to be an EXHIBITOR at the 13th annual WALA

Conference April 2 & 3, 2008 at the Exhibition Hall of the Alliant Energy Center in Madison. Exhibits are open on Wednesday, April 2, 2008.

NOTE: you may exhibit at WALA member rate ONLY if you have paid WALA membership fees for 2007.

Exhibit Booth (8' X 10' space with signage, pipe, drapes and one 8' skirted table)

WALA member: # _____ @ \$500 = _____

Non Member: # _____ @ \$800 = _____

Additional Staff

Your free registration is for the name on the registration form. Additional staff may also take part in meals, coffee break, and reception.

_____ @ \$60 = _____

Networking Dinner

(Optional networking dinner Tuesday, April 1)
(Note table-hosting opportunity on the Sponsorship form)

WALA member: # _____ @ \$75 = _____

Non Member: # _____ @ \$100 = _____

Total Enclosed: \$ _____

Please fill out reverse side of form.

Registration continued on reverse side.

Sponsorship & Exhibitor Registration Information

(Complete this section.)

Name _____

Note: This is how your name will appear on name badge. Please print or type clearly. All correspondence will be sent to the person listed above unless otherwise noted.

Contact Person (if different from above) _____

Title _____

Facility/Organization _____

Type of Business or Service _____

Mailing address _____

City _____ State _____ Zip _____

Phone (days) _____ Fax _____

E-mail _____ Website _____

Note: Each exhibitor receives registration for the person listed above. For additional exhibitor staff, add \$60/each for meals, sessions and handouts. Please list their names below to register them so we can provide nametags, etc. Names can be added later if necessary.

Additional Exhibit Staff @ \$60 – you may let us know by March 15 who will be attending.

Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

Exhibitors: No guarantees – but WALA will try NOT to place you near (list):

Payment Information

(circle one) Check Money Order Visa MasterCard

Credit Card Number _____ Exp. _____

(please print carefully and double check #)

Signature _____

Name _____



Mail or fax your registration to:
WALA, 2875 Fish Hatchery Road,
Madison, WI 53713
Fax: 608/288-0734

their faces • their hearts • our purpose