



## International Society of Air Safety Investigators Seminar

August 21 - 24, 2017

### Exhibitor Registration Form and Fee Summary (US\$)

**Primary Point of Contact: Complete as Appropriate**

Mr. Mrs. Ms. Miss Dr. Other \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Corporate ISASI Member: Yes No ISASI Member Number: \_\_\_\_\_

Check if okay for ISASI to Publicize Your Company

Address (Line 1) \_\_\_\_\_

Address (Line 2) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_ FAX \_\_\_\_\_

Email Address \_\_\_\_\_

Website \_\_\_\_\_

#### Exhibit Booth Fees

**Before July 24, 2017**  
**\$1,750.00**

**After July 24, 2017**  
**\$2,000.00**

Number of Additional Exhibitor Personnel: \_\_\_\_\_

Additional exhibitor personnel must register and pay for any seminar functions including the social events.

**Complimentary Registrations include the Seminar, Tuesday Night Dinner & Awards Banquet.**

**Fees for Tutorials, Optional Tour and/or Companion Programs are extra.**

The fee for a booth includes one complimentary registration. Organizations wishing to register should contact Barbara Dunn at [avsafe@shaw.ca](mailto:avsafe@shaw.ca) for their registration access code.

**NOTE: Sponsors' representatives who wish to take advantage of the complimentary registrations are asked to complete a seminar registration form by going to [www.isasi.org](http://www.isasi.org) to access the seminar registration page.**

**Billing Information**

**Charge My Credit Card**    American Express    VISA    MasterCard

Card Number: \_\_\_\_\_ Expiration: day/month/year \_\_\_\_\_

Name on Card: \_\_\_\_\_ Card Code: \_\_\_\_\_

Signature: *(Required for Credit Card)* \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

**Note:** Credit Card Name must be as printed on the Card. The Card Code is a four-digit number on the front of an American Express card or a three-digit number on the back of a VISA or MasterCard.

Payment by Check—Make payable to **ISASI and reference ISASI 2017** on the check

Company Purchase Order   Purchase Order no. \_\_\_\_\_

Total Amount Submitted: \_\_\_\_\_ US\$

**Send by Mail to:** ISASI, 107 E. Holly Avenue, Suite #11 Sterling, VA 20164, USA

**Send by FAX to:** +1-703-430-4970

Payment by bank wire transfer is also available. For information, please contact Ann Schull at ISASI Headquarters: (TEL: +1 703-430-9668; FAX: +1 703-430-4970; Email: [isasi@erols.com](mailto:isasi@erols.com)).

Please ensure you have your **company name and reference ISASI 2017** on the wire.

Please contact Ann Schull at ISASI Headquarters if you need assistance. (TEL: +1 703-430-9668; FAX: +1 703-430-4970; Email: [isasi@erols.com](mailto:isasi@erols.com))

**All Exhibitor Fees must be received before the Seminar begins to receive recognition.**