



# 89<sup>TH</sup> ANNUAL MEETING

The Westin  
LaCantera Resort  
San Antonio, Texas

## EXHIBITOR PERSONNEL REGISTRATION FORM

Please return this form **NO LATER THAN February 15, 2010**. Changes may be made at no charge until this date. Any changes must be made onsite and will be charged \$25 per badge at registration. Additional registrations over the badge allotment will be assessed a \$100 per badge charge, payable before or at the time of registration. Refunds will not be issued for unclaimed badges.

Return to: American Association of Plastic Surgeons  
Attn: Jennifer Gecawicz  
Fax: 978-524-0498 or [jgecawicz@pri.com](mailto:jgecawicz@pri.com)

Registrant #1: The official in charge of the booth(s) on-site will be:




Name of Exhibiting Company: \_\_\_\_\_

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Registrant #2: Two complimentary registrations are included in your exhibit package. Please list the remaining registrant other than the on-site official contact listed above.

\_\_\_\_\_

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I certify that the above named person(s) meet your eligibility qualifications. I further understand that badges are not to be issued to representatives of leasing companies, financial institutions, publishers, suppliers, vendors, or others who wish to gain admittance for the purpose of making contacts other than in our exhibit. Exhibitors may not register any person(s) not eligible for registration at General Registration.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_