



The Council of Diagnosis and Internal Disorders
2016 Symposium

"Cancer Alternatives"

July 28-31, 2016
The Westin – St. Louis, MO

REGISTRATION FORM FOR EXHIBITORS

Company Name _____

Address _____

Telephone Number _____ Fax _____

Email _____

Representative(s) _____

List Products or Services Available at Booth _____

Any Other Requirements _____

Please check the booth space you will require:

- Booth space of 10' x 8', one draped table, two chairs (\$1,250) _____
- Need Electric - Electric fee is \$65.00

The fee of \$1,250 includes a draped table, two chairs and meal function tickets for up to two representatives. Representatives over two will be an additional \$50.00 each.

A non-refundable check in the amount of \$500.00 will guarantee your exhibit space for 2016. The balance will be due by January 20, 2016.

Please complete this form and mail with your check or Credit card # to:

CDID Attn: Loretta George, 3713 Calumet Ave, Manitowoc, WI 54220

Or fax to 920-682-6983 or email to lorettabrandl@yahoo.com

Requests for travel and hotel reservations should be directed to
Ms. Claudia Rabin Manning of *TrumpTravel* at 1-800-937-3878

Have questions? Call 920-905-4946