

Exhibitor Registration Form
42st Annual ARA Winter Meeting
March 3-4, 2017
Doubletree Southpark
Charlotte, NC

Company Name: _____

Contact Name and/or Attendee: _____

Email address: _____

Contact Phone: _____

Registration Cost:

Exhibitor \$550

Sponsorship Opportunities:

PLATINUM \$1500 (Friday Luncheon)

GOLD \$1000 (Lunch day two)

SILVER \$750 (Breakfast 2 Sponsors)

BRONZE \$500 (Registration)

Total enclosed \$ _____

Checks made payable to ARA mail to:

Sarah A. Schumaier

106 E. Watauga Ave.

Johnson City, TN 37601

sarah@eartech.com

CREDIT CARDS

Number _____

Exp. Date _____

CVV code _____

Zip code _____

“Supporting audiologists in private practice for over 40 years.”