NYSIA Annual Meeting
Exhibitor Registration
January 11, 2018

Company Name: _____

Contact: _____

Address: _____

City/State/Zip: _____

Email: _____ Phone: _____

Exhibitors:

1) _____

2) _____

3) (add'l fee)_____

4) (add'l fee)_____

***Exhibiting at Roosevelt Hotel, NYC—one day only—Thursday 1/11/18. Exhibitor information will be e-mailed 2 weeks before event. If you need electric or any other a/v, you must contact hotel. Contact Heidi for a/v forms..*
Roosevelt Hotel—Phone: 212-661-9600

Registration Deadline:
December 22, 2017
NO REFUNDS AFTER December 31st

NYSIA
NEW YORK SELF-INSURERS ASSOCIATION

EIN #13-5545483

Return Registration Form to:

Heidi Mahoney, Secretary
NYSIA
9 Caldwell Drive
Buffalo, NY 14224

Phone: 716-668-0822
Fax: 716-668-5035
E-mail: secretary@nyselfinsurance.com
www.nyselfinsurance.com

Name _____
Address _____
_____
_____
Phone _____

Method of Payment
☐ Check
☐ Visa
☐ MasterCard
☐ American Express

Credit Card # _____ Exp. date _____

Signature _____

Exhibitor Fees

Sign up for:	Fee	Price
☐ Member fee—2 exhibitors	1200.00	_____
☐ 3rd Member Exhibitor	300.00	_____
☐ 4th Member Exhibitor	300.00	_____
☐ NON-member—2 exhibitors	1600.00	_____
☐ 3rd NON-member exhibitor	500.00	_____

CVV code _____

TOTAL _____