2024 Illinois Society for Histotechnologists 53rd Annual Symposium

Meeting/Exhibit Dates: May 10-11, 2024 Holiday Inn and Suites

495 Airport Road

Elgin, IL 60123 Tel:847-488-9000 FAX: 847-488-9800

Exhibitor Information

Exhibit Company:			
Address:			
City:	State:	ZIP:	
Phone: ()	FAX:()		
Name of Contact:	Title:		
Email Address:			
Names & Emails of Add'l Exhibitors:			

Exhibitor Fees

Booth Specifications	Fee	Quantity	Amount Due
6 ft draped Table (includes 2 chairs) or 6ft floor space	\$400		
Each Additional Table/ or 6ftt floor space	\$300		
Check if electrical outlet is needed []			
	•	Exhibitor Fe	es Due:

Donations/Sponsorship Opportunities

Sponsor Type	Gold	Silver	Bronze
Break or Breakfast	400.00	200.00	100.00
Wine/cheese	500.00	300.00	150.00
Other Donation		·	
	·	Donation	Amount:
Grand Total Due (Fees & Donations):			

Payment Method

Please make checks payable in full to Illinois Society for Histotechnologists or ISH.

Please mail your check and the completed application form by April 15th to: Julie Trejo, ISH President 4 Drummond Dr. Ferguson, MO 63135

You may also pay using a credit card via PayPal on the ISH website <u>http://illinoishistologysociety.org/</u> If preferred payment type, please mail the completed form to the address above and **check** here that you are paying by PayPal (V) X _____. Thank you.