

2026 MHT and Illinois Society for Histotechnologists 55rd Annual Symposium

Meeting/Exhibit Dates: May 28-29, 2026

RUSH Medical Center

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 6ft floor space	\$300		
Check if electrical outlet is needed []			
Exhibitor Fees 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 <http://illinoishistologysociety.org/>
 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.