

**XXIInd International Symposium on Technical Innovations in Laboratory Hematology
May 11 – May 14, 2009 • Las Vegas Hilton • Las Vegas, Nevada, USA**

CONTACT INFORMATION

Company Name _____

Street Address _____

City _____ State/Province _____ Postal Code _____ Country _____

Contact Person _____ Title _____

Phone _____ Fax _____ Email _____

BOOTH PREFERENCE

Number of 10' X 10' booths desired 1 2 3 4 5 6 (circle one)

List up to 6 booth preferences ranking them from most to least preferred:

1st _____ 2nd _____ 3rd _____ 4th _____ 5th _____ 6th _____

* Please list any company(s) that you would prefer NOT to be situated adjacent to your booth(s):

• Please attach a short (less than 50 words) description of your exhibit/company for the exhibition directory.

ISLH EXHIBITION OPPORTUNITIES

Please select your desired exhibition level below:

 Premier Corporate Contributing Exhibitor Only**OTHER OPPORTUNITIES**

Please select any additional opportunities below:

- Closing Banquet Opening Reception & Exhibit Opening Wine & Cheese Poster Session
- Workshop (>50 attendees) Workshop (<50 attendees) Meeting at a Glance Flier Coffee Break(s)
- Satchel Inserts Travel Awards & Scholarships Young Investigator Award

PAYMENT Check drawn in US dollars payable to "ISLH". A 50 USD processing fee will be charged for returned checks. For institutional purposes, the ISLH Federal ID# is 75-2455194. Visa Discover Mastercard American Express

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Return form via fax to ++ 1-312-896-5614 or
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