

**2011 ARKANSAS STATE HVACR CONFERENCE**

Holiday Inn City Center

**Conference Registration Form**

Fort Smith, AR

October 27 and 28, 2011

**CONTRACTOR REGISTRATION****Name Badge and Mailing Information**

Name \_\_\_\_\_ (PRINT)  
 Spouse/Guest \_\_\_\_\_ (PRINT) I will attend Thursday lunch \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail \_\_\_\_\_

	<b>Early Bird (by 10/1)</b>	<b>Regular (after 10/1)</b>	<b>Registration Amount Enclosed</b>
Registration Fee - Member	\$150	\$175	\$ _____
Registration Fee - Non Member	\$250	\$275	\$ _____
<b>FIRST TIME ATTENDEE-SPECIAL RATE</b>	<b>\$125</b>	<b>\$150</b>	\$ _____
Spouse/Guest Fee	\$ 50	\$ 65	\$ _____
Golf Tournament - includes lunch	\$ 75	\$ 85	\$ _____
Golf Sponsorship	\$ _____		\$ _____
Conference Sponsorship	\$ _____		\$ _____
<b>TOTAL AMOUNT DUE</b>			<b>\$ _____</b>

**EXHIBITOR REGISTRATION - Two reps per each exhibit space****Name Badge and Mailing Information**

Exhibitor 1 \_\_\_\_\_ (PRINT)  
 Exhibitor 2 \_\_\_\_\_ (PRINT)  
 Company \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail \_\_\_\_\_

	<b>Early Bird (by 10/1)</b>	<b>Regular (after 10/1)</b>	<b>Number Needed</b>	<b>Registration Amount Enclosed</b>
Exhibitor Member (2 reps)	\$150 per space	\$175	_____	\$ _____
Exhibitor Non-Member (2 reps)	\$250 per space	\$275	_____	\$ _____
Additional Rep	\$ 50	\$ 60	_____	\$ _____
Additional Exhibit Space	\$150	\$175	_____	\$ _____
Golf Tournament - includes lunch	\$ 75	\$ 85	_____	\$ _____
Golf Sponsorship	\$ _____			\$ _____
Conference Sponsorship	\$ _____			\$ _____
<b>TOTAL AMOUNT DUE</b>				<b>\$ _____</b>

\* Exhibit space will have a sign with your firm's name

\* Bring your own extension cords

\* Please list additional exhibitor's name

\* 7 foot height restrictions at the entry doors

**HOTEL INFORMATION**

A limited block of rooms are available at the Holiday Inn City Center for a reduced rate of \$87 per night. Call 1-800-HOLIDAY (465-4329) for reservations and mention the code HVA to get the group rate or go online [www.holiday-inn.com/ftsmithar](http://www.holiday-inn.com/ftsmithar) and enter arrival date and **code HVA**. Please make your reservations prior to **October 20, 2011**. Check in at 4:00 p.m. and check out at 12:00 p.m.

**Please mail completed registration form and make check payable to the Arkansas HVACR,  
 P.O. Box 5275, Fort Smith, AR 72913. For any questions, please contact Eddie Fox at 479-651-5311.**