

# supplier delegate registration\*

\*Non-exhibiting attendees

MARINE HOTEL ASSOCIATION  
CONFERENCE & TRADE SHOW  
APRIL 25-27, 2010

## Payment Information

Please make check payable to: MHA/Registration and forward it to the address indicated. Registration fees may also be charged to a Visa, MasterCard or American Express account.

CARDHOLDER NAME

CREDIT CARD NUMBER  MasterCard  Visa  AmericanExpress (please check one)

EXP. DATE V-CODE

\_\_\_\_\_ Member(s) @ \$375 = \_\_\_\_\_ Spouse(s) @ \$200 = \_\_\_\_\_  
\_\_\_\_\_ Non Member(s) @ \$575 = \_\_\_\_\_ Spouse(s) @ \$250 = \_\_\_\_\_  
\_\_\_\_\_ Trade Show(s) @ \$200 = \_\_\_\_\_

TOTAL DUE = \_\_\_\_\_

## CANCELLATIONS

90 Days: 50 % Refund      60 Days: 25 % Refund      30 Days: No Refund

## Registration Information (Please Print)

COMPANY NAME

ADDRESS

CITY/STATE/ZIP

COUNTRY

PHONE

FAX

E-MAIL

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

NAME OF ATTENDEE

TITLE

## Return form with payment to:

MHA/Registration | P.O. Box 1659, Sausalito, CA 94966 | 415.332.1903 phone | 415.332.9457 fax  
or register online at [www.mhaweb.org/register](http://www.mhaweb.org/register)

