Exhibitor Application Form
POMS 30th Annual Conference
May 2 – 6, 2019

CONFERENCE LOCATION: Washington Hilton – Washington DC
1919 Connecticut Ave. NW
Washington, DC 20009
USA, Phone: 1-202-483-3000

Company: ____________________________________________
Address: ____________________________________________
Contact Name: ________________________________________
Phone: ___________________ FAX: ___________________ E-Mail: ___________________

Name of On Site Representative (if different than Contact):
Phone: ___________________ FAX: ___________________ E-Mail: ___________________

Special Requirements: Please list any special requirements needed here.

Fee: $1200 (US) per exhibit (This does not include incidental charges such as electricity, phone, etc.)
Set up will begin at 7:30am, Friday, May 3rd. Tear down will be at 3pm, Monday, May 6th.

For further exhibit information; contact Bala Shetty at b-shetty@tamu.edu or (979) 845-7024.

Method of Payment:

Check: (make payable to POMS in US currency). Mail it to Dr. Sushil Gupta at the address given below.

Credit Card: Visa:_____ MC:____ AMEX:_____
Credit Card Number: __________________________ Expiration Date: __________________________
Name as it appears on card: ____________________________________________________________

Address of the Card Holder: __________________________________________________________

Signature __________________________________ Date ______________________________

Return Form To: Sushil Gupta
16949 S. W. 16th Street
Pembroke Pines, Florida 33027, USA

Electronic scanned forms may be sent to poms@fiu.edu or b-shetty@tamu.edu.

FOR ALL OTHER INQUIRIES: Sushil Gupta, Executive Director, POMS, poms@fiu.edu.