

MODEL REGISTRATION FORM

WSWA 76TH ANNUAL
CONVENTION & EXPOSITION

March 31 - April 3, 2019
Grande Lakes Orlando



This form is **INTERACTIVE**. You can type directly onto this form, **RENAME IT WITH YOUR LAST NAME**, save it and email it as an attachment to registrations@wswa.org. If returning by mail, please type, print clearly or attach a business card.

GUIDELINES

1. Exhibiting companies are responsible for hiring their own models. **WSWA does not provide models.**
 2. All models must have a badge.
 3. Exhibiting companies may hire a maximum of 2 models per 10' x 10' booth purchased and 4 models per 10' x 20' booth.
 4. Lower Level or Traditional Suite Holders do not have a limit on the number of model badges purchased.
 5. A model is defined as a person who is not an employee of the exhibitor and is hired to assist the exhibitor/suite holder in promoting the company, product and/or service in the Exhibit Halls, Lower Level or Traditional Suites or the Taste of the Industry event.
 6. This form should be completed for all models working in the Exhibit Hall(s), Lower Level or Traditional Suites or in the Taste of the Industry.
 7. Model badges are for models only and cannot be swapped at any time with employees or spouses. **Failure to comply with this restriction may result in the confiscation of badges passes for the duration of the convention.**
 8. Model badges allow access to the Exhibit Halls, Lower Level or Traditional Suites and Taste of the Industry ONLY.
 9. WSWA retains the right to deny or confiscate badges for any behavior, attire or action that WSWA, in its sole discretion, deems inappropriate. The badge fee may be refunded at WSWA's discretion.
 10. If you require a hotel room for your model please email registrations@wswa.org
- All models MUST be at least 21 years of age and may be asked to provide proof of age.**

RETURN THIS COMPLETED FORM WITH PAYMENT:

By mail to: WSWA Meetings and Conventions Department
805 15th Street, NW, Suite 1120, Washington, DC 20005

By email to: registrations@wswa.org

STEP 1: CONTACT INFORMATION

CONTACT FIRST NAME

CONTACT LAST NAME

COMPANY OR BRAND MODEL IS REPRESENTING

TITLE

OFFICE MAILING ADDRESS

CITY / STATE / ZIP / COUNTRY

CONTACT CELL *(for on-site use only)*

EMAIL ADDRESS

MODEL FIRST NAME

MODEL LAST NAME

Please provide the name of the model. If not known, please type MODEL for first name and MODEL for last name.

STEP 2: FEES

THE FEES BELOW ARE PER MODEL.

Exhibit Booth Model \$275 Traditional Suite Model \$275
Lower Level Suite Model \$275 Taste of the Industry ONLY Model \$125

Total # of model passes: _____

STEP 3: PAYMENT

PLEASE INDICATE PAYMENT METHOD*:

* a 3% processing fee will be added to all credit card transactions

- WILL PAY BY WIRE TRANSFER
- A CHECK IN THE AMOUNT OF \$ _____, MADE PAYABLE TO WSWA, IS ENCLOSED.
- WSWA IS AUTHORIZED TO CHARGE \$ _____ TO MY
- VISA MASTERCARD AMERICAN EXPRESS DISCOVER
- CHECK HERE IF CREDIT CARD BILLING ADDRESS IS SAME AS PROVIDED IN STEP 1

CREDIT CARD #

EXPIRATION DATE

CIV

CARDHOLDERS NAME

ADDRESS ASSOCIATED WITH CREDIT CARD

CARDHOLDERS SIGNATURE

CITY / STATE / ZIP

FOREIGN REGISTRANTS AND BANK TRANSFERS:

Send bank transfers to:

Bank of America
10440 Main Street
Fairfax, VA 22030

Routing No.: 026009593

Swift Code: BOFAUS3N (International Wires)

Attn: WSWA Account No.: 001924342720

**NOTE: Initiating bank is responsible
for all fees.**

Send a copy of your bank transfer to WSWA along with your Convention Registration Form.

STEP 4: I HAVE READ AND AGREE TO THE GUIDELINES SET FORTH ON THIS FORM

Signature: _____ Date: _____

FOR OFFICE USE ONLY

REG ID #: _____ DATE REC'D: _____ CHECK #: _____ **WRITTEN CANCELLATION:** DATE REC'D: _____ CHECK #: _____ AMNT RTRN'D: _____