



# CADDAC 11<sup>th</sup> ANNUAL ADHD CONFERENCE OCTOBER 19<sup>TH</sup> & 20<sup>TH</sup> 2019

## EXHIBITOR FORM

---

To register, Please complete this form and email it to [juanita.beaudry@caddac.ca](mailto:juanita.beaudry@caddac.ca)

Company/Organization Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Contact Person \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Representatives Attending( 2 representatives are allowed - this will include their fee for the conference)

1. \_\_\_\_\_ 2. \_\_\_\_\_

---

### EXHIBITOR OPTIONS

Commercial Table: \$1,000

Not for Profit/Charitable Organization: \$500

---

### PAYMENT

Card Number: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Card Address: \_\_\_\_\_