

EXHIBIT STAND RESERVATION FORM

Please print or type all information. Sign and return reservation form with your credit card information or check made payable to the International Association for Food Protection. Full payment is due with this form. Print or type your name as you wish it to appear — only one company name is allowed per stand.

Company				
Address				
Address				
Address				
Postal Code/Zip		Cou	Country	
Phone				
Contact Person			Email	
Website				
All correspondence concerning stand per schedule below.	sponsorship will be directe	d to your designated contact per	son at the address above. Meeting registrations will be provided	for each
Signature				
Cancellation on or before 1	ved with full payment t March 2024 will rec	OO Sam stand The stand of the standard o	Double Stand	
		trations will be sent after pay		
Amount Paid:			Submit Form to:	
Payment: 🖵 Check	☐ Visa	☐ Mastercard	Farrah Benge Email: fbenge@foodprotection.org Telephone: +1 515.276.3344	
Account Number			Mail: International Association for Food Protection.	
Expiration Date Security code			2900 100th St., Suite 309 Des Moines, IA 50322-3855, I	IISA
Cardholder Signature			foodprotection.org	55/1