



Association for Treatment and Training in the Attachment of Children

P.O. Box 533
Lake Villa, IL 60046

local: 847-356-3506
toll free: 866-453-8224
fax: 847-356-7856

www.attach.org
questions@attach.org

21st Annual ATTACH Conference
San Antonio, Texas
September 23 - 26, 2009

Exhibit Table Application

The 21st Annual ATTACH Conference is expected to draw 350 parents and professionals to San Antonio, Texas in September. ATTACH invites you to let these attendees know about your services by exhibiting at our conference.

Please complete the application below and return it to the ATTACH office. Space is limited and applicants will be accepted only after receipt of both a completed application and Exhibit fee. Books/tapes can be sold if you are the author or main distributor of the item.

Items can be pre-shipped to the Crowne Plaza Riverwalk for arrival **no earlier** than Monday, September 21st. Neither the Hotel, nor ATTACH will be responsible for any loss, theft, damage or destruction to any personal property shipped to, stored or displayed on the Hotel's premise. The exhibit hall will be available for set up after 7:00 AM on Wednesday, September 23rd. Exhibit tables will be 8 ft. x 30 inches and set up in an unlocked area. Boxes should be shipped to: Crowne Plaza Riverwalk; ATTN: Your Name, HOLD FOR ATTACH; 111 E. Pecan St.; San Antonio, Texas 78205; please mark the box with the number of boxes (i.e. (1 of 2)). Hotel charge for receipt and delivery is \$5.00 per box up to 10 pounds, \$10.00 for 11-25 pounds, and \$25.00 for boxes over 25 pounds.

Wireless DSL is available through hotel for a multiple day use fee of \$12.15 per day.

Organization Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ E-Mail: _____

Exhibit Table	\$	300.00
I will need wireless DSL at a cost of \$12.15 per day (total # of days x \$12.15)		_____
I will need an outlet at cost of \$33.55 per day (total # of days x \$33.55)		_____
_____ People @ \$ 25.00 each for Wednesday's Lunch		_____
_____ People @ \$ 25.00 each for Thursday's Lunch		_____
_____ People @ \$ 30.00 each for Friday's Lunch		_____

Total Due (Check or credit card information must accompany application.) \$ _____

Visa Mastercard Card # _____
Expiration Date _____ V-Code (on back) _____