SSWR EXHIBITOR / ADVERTISER REGISTRATION FORM

Register online at www.sswr.org. Please add an additional $15.00 processing fee if mailed or faxed.

Booth Preference (subject to availability):

1st Choice      Booth # _______________
2nd Choice     Booth # _______________
3rd Choice      Booth # _______________

By submitting this form you are giving SSWR permission to contact this person about this conference. Email addresses will not be sold to or shared with other organizations, nor will they be included in any publications by SSWR.

Would you like to receive emailed announcements of future SSWR conferences and activities?  □ Yes □ No

Photo Release Statement & Agreement: From time to time, SSWR will take photos of conference events and reserves the right to use these photographs in its promotional materials. Unless this permission is revoked in writing to SSWR, by virtue of their attendance all conference participants agree to the use of their likeness in such materials.

Registering as:  □ Exhibitor  □ Advertiser  □ Exhibitor/Advertiser

NAME OF EXHIBITING ORGANIZATION - Exact content of 7” x 44” identification sign for EXHIBIT BOOTH:

DEPARTMENT/ORGANIZATION WEBSITE:

PLEASE CIRCLE THE PRICE YOU ARE PAYING:

<table>
<thead>
<tr>
<th></th>
<th>Qty</th>
<th>Registered by Nov. 8, 2019</th>
<th>Registration after Nov. 8, 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exhibitor Only</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advertiser Only (Copy must be received by Nov. 8, 2019)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-Page 4-Color Inside Front Cover (6” wide x 7” high)**</td>
<td>1</td>
<td>$3,000</td>
<td>$3,300</td>
</tr>
<tr>
<td>Full-Page 4-Color Inside Back Cover (6” wide x 7” high)**</td>
<td>1</td>
<td>$3,000</td>
<td>$3,300</td>
</tr>
<tr>
<td>Full-Page 4-Color Inside Book (6” wide x 7” high)***</td>
<td></td>
<td>$1,750</td>
<td></td>
</tr>
<tr>
<td>Exhibitor &amp; Advertiser (Copy must be received by Nov. 8, 2019)</td>
<td></td>
<td>$4,000</td>
<td>$4,300</td>
</tr>
<tr>
<td>1 Booth + Full-Page Color Inside Front Cover****</td>
<td>1</td>
<td>$4,000</td>
<td>$4,300</td>
</tr>
<tr>
<td>1 Booth + Full-Page Color Inside Back Cover****</td>
<td>1</td>
<td>$4,000</td>
<td>$4,300</td>
</tr>
<tr>
<td>1 Booth + Full-Page Color Inside Book**</td>
<td></td>
<td>$2,800</td>
<td>$3,100</td>
</tr>
</tbody>
</table>

* First come, first served basis.  ** First right of refusal is given to the previous advertiser.

Names of person(s) staffing booth. Each person staffing the booth must register for the conference.

Staff #1:  ___________________________  Fee: Complimentary

Staff #2:  ___________________________  Fee: Per Registration Form

Staff #3:  ___________________________  Fee: Per Registration Form

ADVERTISERS - Copy must be received by November 8, 2019.

□ Print ready copy sent electronically (in PDF “press” format with all fonts converted to outlines) - submit online at www.sswr.org

**Copy MUST be exactly to the dimensions specified above. In the event an ad is not appropriately sized, Travelink/SSWR is not responsible for the reformating. Travelink/SSWR does not proof advertising copy.
METHOD OF PAYMENT (Pre-Payment Required) Please print legibly: $__________________ Total amount + $15 processing fee paid

Payment by:  □ Credit Card  □ Check (made payable to TRAVELINK, INC)  □ Purchase Order (#____________________)

Credit Card Type:  □ Master Card  □ Visa  □ American Express  □ Discover

Card #_________ - ___________ - ___________ - ___________ Expires ___________ / ___________ CVV: ___________

Name on Card __________________________________________ Signature _________________________________________

Billing Address:  □ Same as above ______________________________________________________________

Your Credit Card Statement will show a charge from Society for Social Work and Research, Nashville, TN (615) 367-4900.

By your signature below, if requesting an exhibit booth, acknowledges your agreement with the Exhibit and Advertiser Information located at www.sswr.org, including the liability clause.

Signature and Title of Person Completing Form: ___________________________________________________________

Register online at www.sswr.org. Please add an additional $15.00 processing fee if mailed or faxed.