

Register Today!

Exhibit Booths are Going Fast

Payment Information:
Exhibit booths will not be confirmed unless payment is received with registration.

- Enclosed is our **cheque** made payable to: Canadian Network for Respiratory Care in the amount of \$
- Electronic Funds Transfer in the amount of \$

Mail cheque along with your registration to: Canadian Network for Respiratory Care 16851 Mount Wolfe Road Caledon ON LTE 3P6



Sponsor and Exhibitor Registration Form

Company Name:					
Company Street Address: _				City:	
Province/State:	Postal/Zip Code:				
Names for Badges:					
Primary Contact Name:					
Primary Contact Email:					
Work Phone Number:			Mob	le Phone Number:	
Sponsorship Fees:	Diamond	Partner	\$55,000	Other \$60.000	
	Platinum	Partner	\$30,000	Other \$35,000	
	Gold	Partner	\$25,000	Other \$30,000	
	Silver	Partner	\$15,000	Other \$20,000	
	Bronze	Partner	\$ 7,500	Other \$10,000	
	Friend	\$ 5,000			
	Exhibitor	\$ 2,500		Sub Total = \$	
Additional badg	eceive two badge ges are available			\$250 x Number of Badges = \$	
Conference Attendar					
workshops. If you	do not include a u or one of your t es and workshops	wo represer	ntatives would		
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Please complete all fields on this form, print and mail with your company's cheque made payable to the Canadian Network for Respiratory Care. CNRC reserves the right to change speakers and/or modify program content. Because of the very limited number of sponsor and exhibitor booths available, no refunds will be given.