

Illinois Dermatological Society EXHIBITOR REGISTRATION/CORPORATE SPONSOR FORM 2019 PRACTICE MANAGEMENT & CODING WORKSHOP

Please provide the information requested below and return to:
Illinois Dermatological Society ❖ Richard H. Paul, executive director
10 W. Phillip Rd., Suite 120 ❖ Vernon Hills, IL 60061-1730
Fax: 847/680-1682 ❖ Telephone: 847/680-1666 ❖ E-mail: Rich@RichardPaulAssociates.com

IDS Tax ID# - 37-1042921

Company name	
Contact person	
Address	
City/State/Zip	
Telephone	
Fax	
Email	
Important: Include the name(s) and addresses of your company representatives who will be attending the meeting. (Use additional sheets if you need more room).	
Representative(s) attending enter names here →	
Representative's_email	

Exhibit Table – \$1,750 Exhibit space will be a 6-foot table-top display.

Total amount of payment \$ _____

Form of payment: Check (payable to "Illinois Dermatological Society") Visa MasterCard Amex

Credit Card # | | | | | | | | | | | | | | | | | | | | | | Exp. Date | | / | | | |
Security Code (3 or 4 digits) | | | |

Name on card: _____

Signature _____

Billing address (if different from above): _____

Register online at: www.IllinoisDermSociety.org