

EXHIBITOR REGISTRATION

IAWC Forty-Fifth Annual Seminar

October 12-13, 2023

FOR EXHIBIT SPACE ONLY

Name _____

Company Name: _____

Mailing address: _____

City _____ State _____ Zip _____

Email address: _____

FEE - \$500.00

Fee includes ONE registration for exhibitor representative. No exhibitor may attend any of the seminar unless they are a paid registrant. Checks should be made payable to IAWC and sent to:

Iowa Association of Workers' Compensation Lawyers, Inc.

2700 Grand Ave., Suite 111

Des Moines, IA 50312

ADDITIONAL EXHIBITOR REPRESENTATIVE

Name _____

Title _____

Fee includes 6' draped table and two chairs. SIGNS ARE TO BE FURNISHED BY THE EXHIBITOR

Questions??

Call Linda Gilbert at (515)262-2010 or Email: lkggilbert@gmail.com