

# HSNM Exhibitor Table – Reservation Form

## INFORMATION SHEET

Please Print

---

**Organization Name**

---

**Street Address**

**Ste.#**

---

**City /State /Zip**

---

**Best phone number to contact you**

---

**Email Address**

**# of Tables to Reserve: @ \$60 each \_\_\_\_\_**

---

**Name(s) on Badge(s) / Organization**

---

**See you in May.**

**Thanks HSNM!**

This Information will be confidential