

Practical Computing Expo Reservation

Contact Information

Contact Name _____

Affiliation _____

Email _____ Phone _____

Address _____

City _____ State/Province _____ ZIP/Postal Code _____

I understand the 2014 CSP Practical Computing Expo will take place from 1:30 PM to 3:30 PM on Saturday, February 22, 2014 and that I may showcase the particular products or services of my company at the Expo. While my/our presentation will meet the goals of the Conference and specifically address one or more of the Conference themes, I am free to provide attendees with sales brochures and other information specific to my product or service.

Payment Information

Total Amount: \$750.00

_____ Please Send an Invoice

_____ Check Enclosed

_____ Credit Card (circle one) VISA MASTERCARD AMERICAN EXPRESS

Card Number _____ CVS Number _____ Expiration _____

Name on Card _____

Authorized Signature _____

Return to by August 30, 2013 to:
PCE/CSP 2013

American Statistical Association • 732 North Washington Street, Alexandria, VA 22314
amy@amstat.org • Phone: (703) 684-1221 • Fax: (703) 684-3445

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PCE Information (Required for your proposal to be considered)

Instructor Name _____

Affiliation _____

Email _____

The information you provide will be used in CSP promotional and registration materials. Please note that there is a 1200 character max per area.

Title:

Description:

Outline & Objectives:

About the Instructor:

Brief Description of the Product:

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