NBAA2009 MEETING ROOM REQUEST

NBAA 2009
62ND ANNUAL MEETING & CONVENTION
ORLANDO, FLORIDA › OCTOBER 20, 21, 22

FAX OR MAIL COMPLETED FORM WITH PAYMENT IN FULL TO:
National Business Aviation Association, Inc.
Attn: Sandy Wirtz
1200 Eighteenth Street NW, Suite 400
Washington, DC 20036-2527, U.S.A.
Tel: (202) 783-9366; Fax: (202) 833-9668
E-Mail: swirtz@nbaa.org

NBAA2009 MEETING ROOM REQUEST

NBAA provides meeting rooms at the Orange County Convention Center at at a cost of **$150 per room per day** to Exhibitors. These rooms are allocated on a first-come, first-served basis. Catering, audio visual, signage and marketing are the sole responsibility of the Company using the room. Also please note that NBAA is not responsible for the promotion of these meetings. Further information on and order forms for meeting rooms will be available in the *Exhibitor Service Kit* that will be distributed in May 2009.

NBAA makes every effort to provide meeting rooms that are appropriate in size and set in the manner requested. As rooms must be shared throughout the course of the Show, however, they cannot always be set exactly as requested.

To secure meeting space, return completed form to NBAA's Sandy Wirtz with payment in full. Once room has been confirmed, a notice of the room number and room set will be sent. Please understand that requests for room set changes may result in additional charges. Please provide any special requests in advance when possible.

TYPE OR PRINT (All correspondence relating to Meeting Room Requests should be directed to):

COMPANY NAME _____ MEMBER # _____

CONTACT _____ CONTACT TITLE _____

ADDRESS 1 _____

ADDRESS 2 _____

CITY _____ STATE (if U.S. Address) _____ ZIP/POSTAL CODE _____ COUNTRY _____

PHONE _____ FAX _____ CELL PHONE _____

E-MAIL (required) _____

MEETING NAME: _____

TYPE OF MEETING: ❑ Business Meeting ❑ Breakfast ❑ Luncheon ❑ Reception

BOOTH #: _____ **HALL:** _____ **DAY & DATE OF MEETING:** _____

EXACT START TIME OF MEETING: _____ **APPROXIMATE ENDING TIME OFMEETING:** _____

TO HELP FIND A ROOM OF THE APPROPRIATE SIZE, PLEASE INDICATE HOW MANY PEOPLE YOU EXPECT TO ATTEND THIS MEETING? _____

ROOM SET:

❑ Theatre Style

❑ U-Shape (seating only)

❑ Rounds of 10

❑ Classroom Style

❑ Conference Style (tables and chairs)

COMMENTS/SPECIAL REQUESTS:

_____

PAYMENT METHOD:

Company checks and bank wire transfers are the preferred methods of payment for NBAA2009. **Credit card payments are an accepted form of payment. Payments, however, received in excess of $20,000 will be subject to a 3% processing fee.**

❑ Enclosed is a check in the amount of:$ _____ **Check Number:**_____

MAKE ALL CHECKS PAYABLE TO:NATIONAL BUSINESS AVIATION ASSOCIATION, INC.

❑ Charge my credit card in the amount of:$ _____ **Cardholder's Name:**_____

Card Type: ❑ American Express ❑ MasterCard ❑ Visa ❑ Discover

CREDIT CARD NUMBER _____ EXPIRATION DATE _____ SIGNATURE (FOR CREDIT CARD) _____

Bank Wire Transfer Instructions: Bank of America, 730 Fifteenth Street NW, Second Floor, Washington, DC 20005, Tel: (202) 442-3972; Fax: (202) 442-3988; Account Name: National Business Aviation Association, Inc.; Routing #: 026009593; Account #: 2404389; Swift Code: BOFAUS3N. Please indicate on the wire transfer the Exhibiting Company name, invoice number and reference for payment (i.e., Exhibit Space, Static Display Space, Sponsorship, Show Guide Advertising, Registration, Press Room, Meeting Room, Publications Bin, Advertising, etc.). Please contact Sandy Wirtz at swirtz@nbaa.org to secure an invoice number prior to making a bank wire transfer.