



**EXHIBITOR REGISTRATION**  
**34<sup>th</sup> Annual Meeting of the American Society of Biomechanics**  
**Providence, Rhode Island**  
**August 18 - 21, 2010**

*Exhibitor Registration Deadline: August 1, 2010*

Company: \_\_\_\_\_

Division/Department: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Attendee #1		Attendee #2	
Name <sup>1</sup>		Name <sup>2</sup>	
Phone <sup>1</sup>		Phone <sup>2</sup>	
Fax <sup>1</sup>		Fax <sup>2</sup>	
email <sup>1</sup>		email <sup>2</sup>	

Special Requests: \_\_\_\_\_

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*(i.e. booth size, exhibitors you want to be near or separated from, additional power requirements, etc)*

☐ Early Registration (Payment received by January 15, 2010) **\$2,100.00**

☐ Regular Registration **\$2,200.00**

**Check or Money Order Payable to:** The American Society of Biomechanics

**Remit Payment and Copy of this Form to:** The American Society of Biomechanics  
 c/o Arlene Garcia  
 Bioengineering Laboratory  
 Coro West, Suite 404  
 1 Hoppin Street  
 Providence, RI 02903  
 Phone (401) 444-4164  
 Fax (401) 444 -4418