

2022 EXHIBITOR DIRECTORY FORM

Please complete this information and return it by email by **September 12, 2022**, to ensure your listing in the printed program. The information provided below is what will be listed in the Final Program. Please include your institution's logo when sending in this form.

| Company Name | | |
|---|--|--|
| On-Site Contact Name (to appear in the printed program) | Title | |
| Address | | |
| City | State/Province | |
| Zip/Postal Code | Country | |
| Phone | Email | |
| Website | Twitter Handle (if applicable) | |
| Description of products and/or services offered (subje | ct to editing due to space limitations): | |

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|--|------|--|

PLEASE LIMIT YOUR DESCRIPTION TO 75 WORDS OR LESS.

Return this completed form to bhowe@astmh.org