



Individual names will not be printed on the entrance passes. All orders will be shipped in the weeks prior to the start of A+A 2009 via UPS® Ground, and within the United States of America only. All entrance passes and show directories are NON-REFUNDABLE.

1. CONTACT INFORMATION / MAILING ADDRESS (please print or type):

Contact Person	Title
Company Name	
Street Address (NO P.O. BOX!)	City, State
	Zip
Telephone	Fax
	E-Mail

2. PLEASE HELP US SERVE YOU BY COMPLETING THE FOLLOWING:

<p>How did you learn about A+A 2009?</p> <p><input type="checkbox"/> Direct Mail <input type="checkbox"/> Advertisement <input type="checkbox"/> Online / Internet</p> <p><input type="checkbox"/> Word of Mouth <input type="checkbox"/> Past Show</p> <p>Which stagings of A+A have you visited in the past?</p> <p><input type="checkbox"/> 2007 <input type="checkbox"/> 2005 <input type="checkbox"/> 2003 <input type="checkbox"/> Earlier Staging <input type="checkbox"/> None</p> <p>Association Affiliations?</p> <p><input type="checkbox"/> NSC National Safety Council</p> <p><input type="checkbox"/> Other: _____</p> <p>What is the size of your company?</p> <p><input type="checkbox"/> 1-25 <input type="checkbox"/> 26-75 <input type="checkbox"/> 76-150 <input type="checkbox"/> 151-300 <input type="checkbox"/> 301-500 <input type="checkbox"/> 500+</p>	<p>Which of the following best describes your or your company's involvement in this industry? (Please make one section from both A and B below.)</p> <p>A. <input type="checkbox"/> Manufacturer's Rep / Dealer <input type="checkbox"/> Human Resources</p> <p><input type="checkbox"/> Dealer / Distributor <input type="checkbox"/> Government Agency</p> <p><input type="checkbox"/> Press / Service</p> <p>B. <input type="checkbox"/> Fire Protection <input type="checkbox"/> Occupational Healthcare</p> <p><input type="checkbox"/> Environment <input type="checkbox"/> Industrial Hygiene</p> <p><input type="checkbox"/> Risk Management / Security</p> <p>To which industry trade publications do you subscribe?</p> <p><input type="checkbox"/> EHS Today <input type="checkbox"/> Industrial Safety & Hygiene News</p> <p><input type="checkbox"/> Occupational Health & Safety <input type="checkbox"/> Professional Safety</p> <p><input type="checkbox"/> Safety & Health <input type="checkbox"/> Other: _____</p>
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3. PLACE YOUR ORDER:

PLEASE SEND ME:	_____	One-day entrance pass(es) at \$28.00 each	For a total of:	\$ _____
indicate number required	_____	Show Directory(s) at \$24.00 each	For a total of:	\$ _____
<i>NOTE: Entrance passes are also valid for use to and from the show on Düsseldorf's public transportation network (VRR).</i>			Shipping and handling, add:	\$6.75
TOTAL AMOUNT:				\$ _____

4. METHOD OF PAYMENT / CREDIT CARD AUTHORIZATION:

CHECK OR MONEY ORDER Mail this form with check made payable to:
Messe Duesseldorf North America, 150 N. Michigan Avenue Suite 2920, Chicago, IL 60601

CREDIT CARD **Complete the information below and return this form to us at SECURE FAX (312) 236-1994.**

Circle one: **VISA** **MASTERCARD** **DISCOVER** **AMERICAN EXPRESS**

Card Number	Expiration Date	Card Verification Code (see back of card)
Name on Card	Card Holder's Signature	Today's Date

5. BILLING ADDRESS (if different from mailing address):

Contact Person	Company Name (if applicable)
Address	City, State, ZIP
Telephone	