

**PLEASE RETURN THIS FORM BY:**

**FRIDAY, April 26, 2024**

**EXHIBITOR REGISTRATION FORM**

**Association for Pennsylvania Municipal Management  
Wind Creek Bethlehem, Pennsylvania  
May 20-22, 2024**

Company Name: \_\_\_\_\_  
(please print)

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

Phone Number: (\_\_\_\_) \_\_\_\_\_

Fax Number: (\_\_\_\_) \_\_\_\_\_

**Two complimentary exhibitors attending with a booth:**

1. \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

I will Golf on Monday, May 20 at the Riverview Country Club, Easton, PA - \$175

2. \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

I will Golf on Monday, May 20 at the Riverview Country Club, Easton, PA - \$175

**Additional Exhibitors may register here: [www.apmm](http://www.apmm)**

**All additional fees must be paid in advance of the conference. Check or credit card is acceptable.**

Please complete the following if paying by credit card:

**Please circle one: Visa Discover MasterCard American Express**

Name as it appears on the card: \_\_\_\_\_ Total to be charged \$ \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Three-digit (4 w/AMEX) security code \_\_\_\_\_ Billing zip code: \_\_\_\_\_

Signature: \_\_\_\_\_

***Please mail, fax, or email this form to the PML office by Friday, April 26, 2024 to:  
APMM, Attn: Marcia Cavanagh, 414 North Second Street, Harrisburg, PA 17101  
mcavanagh@pml.org - FAX: (717) 236-9493***

Don't forget to make your hotel reservations at Wind Creek Bethlehem.