



Exhibitor Order Form

Organization Name: _____
Primary Contact Person: _____
Postal Mailing Address: _____
Email Address: _____
Phone Number: _____

	Number	Amount
Shoshoni and/or Cheyenne Room - \$130 ea.	_____	_____
10'x10' Booth - \$80 ea.	_____	_____
30"x72" Table - \$20 ea.	_____	_____

Please make check or money order out to "Astronomical League".

Please return this form and your payment to:

ASTROCON 2017
P.O. Box 901631
Sandy, UT 84090-1631

Main Vendor Area 59 Booths Available 10'x10'

Mallway with 30"x72" tables (up to 25)

<--- Hotel Lobby

Shoshoni
Room

Cheyenne
Room

Ballroom --->