



*Health Industry
Representatives Association*

HIRA

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www.hira.org

HIRA PAVILION PROGRAM

AORN 2018

Co - Exhibitor Application

March 25-27 / Ernest Morial Convention Center / New Orleans, LA

Please type or print clearly.

Company Name: _____

Contact Person: _____ Title: _____

Email Address: _____

Mailing Address: _____

City: _____ State or Province: _____ Zip Code: _____ (+4) _____

Phone: _____ Cell: _____ Fax: _____

50% deposit, is required to hold space

Co-Exhibitor Fee \$3,100

Return Application by:

Email: hira@hira.org

Mail: 8 The Meadows/Newnan, GA 30265

*****You must be a member of HIRA to participate in the pavilion program. *****

Manufacturer Membership is \$545/year.

To apply – complete the membership application online at www.hira.org/manufacturer-membership-application