RESERVATIONS:

Call the

Best Western (Host hotel)

to make your reservation and mention
NEWWA to get negotiated rate or
contact any of these hotels
listed below that are very close
to the EXPO

Best Western

181 Boston Post Road West Marlborough, MA 01752 (508)-460-0700

Additional hotel options:

Embassy Suites

123 Boston Post Road W. Marlborough, MA 01752 508-485-5900

Hampton Inn

277 Boston Post Road W. Marlborough, MA 01752 508-787-9888

Courtyard Marriott

75 Felton Street Marlborough, MA 07152 508-480-0015

Attendee Registration



NEWWA EXPO 2024

MARCH 8-9, 2024

Friday: Expo & Seminars Saturday: Expo & Seminars

@

Best Western

181 Boston Post Road West Marlborough, MA 01752 (508)-460-0700

New England Water



Well Association

REGISTRATION FORM:

PRE-REGISTRATION DEADLINE IS MARCH 1 (payment must be received by then)

New England Water Well Expo- March 8-9, 2024 (Friday and Saturday) Best Western, Marlborough, Massachusetts

PLEASE PRINT - THIS FORM WILL BE USED TO PRODUCE YOUR NAME BADGES

Company Name:	Contact Name:		
Address:			
City:			
E-mail:			
Names of Registrants:			
Company Member:	Spouse (FREE):		Child (FREE):
	_		
	_		
	_		
FRIDAY - Sei	minars: 10am	– 4nm ∙ Fxr	oo: 4pm – 8pm

SATURDAY - Seminars: 9am - 11am • Expo: 8am -1pm

- Pre-Registration Fee \$25 per person (Spouse & Children under 16 Free)
- After March 1, at the door registration Fee: \$30.00 per person (Spouse and Children under 16 Free)
- Or you can also register online and add guests simply by visiting www.newwassociation.org

REGISTER IN 1 OF 3 WAYS:

- Pay by Credit Card and register online at: WWW.NEWWASSOCIATION.ORG
- Make Check or Money Order payable to: NEWWA (New England Water Well Association) and mail this payment to: CC Meeting & Event Services 7 Bailey Lane
- 3. Pay by credit card and FAX this form to: (845) 278-1899

PRE-REGISTRATION - By March 1st

Persons @ \$25.00/person\$	Persons	@ \$25.00/person	\$
----------------------------	---------	------------------	----

AFTER March 5 – **On-site Registration ONLY**

Persons @ \$30.00/person\$ _____

TOTAL AMOUNT:

Charge (3% processing fee) my:

☐ Visa ☐ Mastercard

Brewster, NY 10509

(PLEASE PRINT CLEARLY)

Card Number: _____

Expiration Date: _____ CVV_____

Amount: _____

Cardholder Name: _____

Signature:

New England Water Well Association / Markets Beyond Inc. LLC

7 BAILEY LANE, BREWSTER, NY 10509 • (p) (845) 278-1892 • (f) (845) 278-1899