TNSA, INC., CONVENTION 2025
DOUBLETREE BY HILTON AUSTIN HOTEL,
AUSTIN, TEXAS 78752

OCTOBER 1, 2025 THRU OCTOBER 4, 2025
(EXHIBIT SHOW: FRIDAY OCTOBER 3, 2025

CONVENTION EXHIBIT RESERVATION FORM

Please mail/email this form, along with your check/credit card made payable to:
Texas Nursing Students' Association, Inc.
P.O. Box 516
Maypearl, Texas 76064

Company Name: _____

Person/s Staffing Booth: _____**Title:** _____

_____**Title:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: ( )_____ **Fax:** ( )_____ **Email:** _____

Please refer to enclosed exhibit prospectus for additional information.

PLEASE RESERVE _____ **BOOTH (S) - $800.00 EACH**

TOTAL AMOUNT ENCLOSED: $ _____

_____

___

Signature of Authorized Representative Date

PLEASE CHARGE MY CREDIT CARD: $_____

MC/VISA/AMEX #: _____

EXPIRATION DATE: _____ SECURITY CODE #_____

SIGNATURE OF CARD HOLDER: _____

NAME AS IT APPEARS ON CREDIT CARD: _____

CREDIT CARD BILLING ADDRESS ZIP CODE: _____