



**National Association of  
Pediatric Nurse Practitioners<sup>SM</sup>**

NAPNAP • 40 Exchange Place, Suite 1902 • New York, NY 10005 • Phone: 877-369-0994 • [www.napnap.org](http://www.napnap.org)

**National Association of Pediatric Nurse Practitioners  
2025 Industry-Sponsored Non-Continuing Education (Non-CE)  
Product Theater Application**

**Note:** Meeting space assignment is on a first come basis. No one is guaranteed space until payment is received.

**Supporting/Exhibiting Company:**

**Organizer (Contracting Company if different):**

**Contact Person:**

**Title:**

**Address:**

**City:**

**State:**

**Zip:**

**Phone:**

**Fax:**

**Email:**

**Topic of Product Theater:**

**\$24,750: Live Non-CE Product Theater – Please select date and time:**

\_\_\_ Monday Lunch (3/10/25) \_\_\_ Tuesday Breakfast (3/11/25) \_\_\_ Tuesday Lunch (3/11/25)

\_\_\_ Wednesday Breakfast (3/12/25) \_\_\_ Wednesday Lunch (3/12/25)

**Anticipated Attendance:** \_\_\_\_\_ attendees **Room Set-up:** \_\_\_\_\_ (Seating style)

***Deadline for application is February 7, 2025***

**SELECT PAYMENT TYPE** - Submit payment with application

Visa  MasterCard  American Express

Card #: \_\_\_\_\_ 3 or4 digit Security Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Total Amount: \_\_\_\_\_

Cardholder: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Check: Make Checks payable to: NAPNAP Tax ID# 23-7403934

Send completed application and payment to: Attn: Conference Dept. 40 Exchange Place, Suite 1902, New York, NY 10005 or Email: [hkeesing@napnap.org](mailto:hkeesing@napnap.org)