## **Longview Factory Visit Form**

Desired Outcome of Visit

Completed forms need to be emailed to your Regional Sales Manager



cheduling ———						
	MAON Facility					
Date your group will be at the A	AAUN Facility:					
Total number of guests (total fro	om <b>Page 2</b> including reps	s and guests):				
Arrival Date:	Departure Da	Departure Date:				
rimary Point of Cont	act ———					
First Name:	Last N	lame:				
Email:		Phone:				
ood, Lodging, and Tr Does AAON need to book hotel	•					
Which hotel do you prefer, if a	vailable?					
Transportation to/from hotel?  Are there other arrangements		oortation to/from Airport? eed assistance? Transportation, special events, etc.				
Do you need lunch arranged at	the plant?	Do any guests have dietary restrictions?  If yes, list the restrictions below.				
ature of Visit						
Include product focus, past issues,	concerns, etc.					
metade product rocas, past resuces,						

**Dress Code:** Business casual. Shorts, cropped slacks, capris, skirts/dresses, and open toe shoes are not permitted on the manufacturing floor. Safety covers will be provided if steel/safety-toe shoes are not worn.

ersonnel –				
Rep —				
Firm	Name	Title	Email	

## Guest

Company	Customer Type	Name	Title	Email

## Flight Information -

Arrival		Filtra III	District continu	Departure		Total O and		
Date	Time	Flight #	Flight #	Airline	Pickup Location	Date	Time	Total Guests