

Application for Exhibit Space

2018 Minnesota Association of Townships Educational Conference and Annual Meeting

(PLEASE PRINT:) (This information will be used in the Exhibit Guide for guests to reference.)

Firm Name: _____

Contact Person: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Website: _____

Exhibit Confirmations: Written confirmation of your booth assignment and other important information will be sent out in the beginning of November **to the contact person listed above.**

1. **Involvement Options** *(check all that apply) (Deadline to apply is October 30th)*

- Exhibit Booth (**\$500/by Oct 16** or **\$600/after Oct 16**) Quantity: _____
- Vehicle Display (\$300) Dimensions: Length _____; Width: _____; Height: _____

Vehicle Description: _____

(NOTE: You must have a regular booth to add the vehicle display.)

2. **Booth Identification Sign Should Read:** _____

3. **Special Request:** _____

Such as whom you would/would not like to be near, next to food/beverages, etc. Layout of the hall is not finalized until after the final deadline.

4. **Briefly Describe Your Product/Service** (this will be used in the Exhibit Guide): _____

5. **Electrical Service**

Electricity is NOT included in the Exhibitor Fee. Information on ordering electricity and other add-ons will be included in the Confirmation Packet. You may also request these forms at any time.

6. **Door Prize Options:** *All options below receive acknowledgement in the Program, Exhibit Guide, and at the drawings.*

- Our company will conduct its own drawing
- Our company will contribute \$ _____ toward the purchase of appropriate BINGO door prizes by the Association to be given away during the Conference.
- Our company will contribute the following item(s) to the BINGO door prize drawings during the Conference:

Please NOTE: Due to time constraints on drawing door prizes, if you provide multiple items, we may group them.

7. **Representatives who will attend Conference.** (Name badges will be prepared for up to four individuals)

1. _____ 3. _____
2. _____ 4. _____

NOTE: Due to the Bingo Card activity, we recommend that at least two representatives be at the exhibit booth, especially Thursday night.

8. **Payment Options:**

- Enclosed is our check (payable to Minnesota Association of Townships) Check# _____ for \$ _____
- Please bill me (purchase order # _____) at the above address.

Deadline to apply is October 30th.
Minnesota Association of Townships
PO Box 267
St Michael, MN 55376

Remember to enclose the
two Certificates of Insurance!