

## **SPONSOR + EXHIBITOR APPLICATION FORM**

COMPANY NAME			_ CONTACT NAME			TITLE		
BILLING ADDRESS			CITY		ST/PROV	ZIP	COUNTRY	
PHONE	FA	х			POINT OF CONTACT EMAIL			
EXHIBIT BOOTH [50	% DEPOSIT REQUIRED	TO RESERVE]				PAYMENT REMIT	TANCE Societies of North America	
□ 10' X 10' QTY	BOOTH SELECTION RANKED BY PREFERENCE	1 <sup>ST</sup>	2 <sup>ND</sup>	3 <sup>RD</sup>	_ PRICE \$	106 York Drive Madison Heights, VA 24572 USA NOTES: Deposit payment in US \$ must accompany this form in		
10' X 20'	BOOTH SELECTION RANKED BY PREFERENCE	1 <sup>st</sup>	2 <sup>ND</sup>	3 <sup>RD</sup>	_ PRICE \$			
SPONSORSHIP [509	% DEPOSIT REQUIRED T	O RESERVE - N	MINIMUM \$4,000]				your space as a sponsor or exhibitor.	
ТҮРЕ		SELECTION . BY PREFERENCE	1 <sup>ST</sup> 2 <sup>ND</sup>	3RD	PRICE \$	DEPOSITS ARE NON-REFUNDABLE.		
ACCOUNT NUMBER		CSV EXPIR	ATION CARDH	HOLDER N	IAME	SIGNATURE	BILLING ZIP	
standards, and/or rules st	tated on www.MACNA.o	rg/policies, [2]	agree that all doo	cuments	attached hereto are part of this	agreement as if full	ithout limitation, the terms, conditions, y set forth or incorporated herein, and signature, and execute this agreement	
SIGNATURE			TITLE			[	DATE	
CONTACT INFORMATION Mr. Tom Lisciandra   MA MACNASales@MASNA.or		ne: 1.669.25M	IACNA, Fax: 1.41	3.541.84	43, Email: MACNASales@MAS	SNA.org. Please ema	ail your company banner and logo to	
ADDITIONAL INFORMATION Is there a competitor you		d next to?						
Will you be selling items f	rom your booth?	☐N, if yes plea	se check: 🗌 dry	goods [	vertebrates invertebrates	other:		