

BUSINESS EXPO FORM

EVENT TITLE | WOMEN'S LUNCHEON / FEB 2020

DATE / TIME | FEB.24TH, 2020 **LOCATION** | Memorial Regional South

SET-UP & REQUIREMENTS

Exhibitor Booth Package will include the following

(1) One 6' Table (2) Two Chairs (3) 2 Event Admissions

Exhibitors are responsible for removing any remaining materials/ cleaning up their exhibition space Note:
Cancellation and refunds are not available

PRICING

DESCRIPTION	PRICING
Expo Table Member	\$75
Expo Table Non Member	\$100
Expo Table Trustee	FREE

EVENT COMMITMENT

- () Yes, I would like to participate at VIP Level
() Yes, I would like to participate at Standard Level

Company Name: _____

Contact Name: _____

Phone: _____ E-Mail: _____

AMOUNT DUE: \$

METHOD OF PAYMENT | VISA () MC () AMEX () DISCOVER () CHECK ENCLOSED # ()

CARD _____ - _____ - _____ - _____ EXP DATE _____ CV CODE _____

BILLING ADDRESS _____ CITY/STATE/ZIP _____

NAME SHOWN ON CARD _____ SIGNATURE _____