

SPONSOR AND EXHIBITOR REGISTRATION

Sponsor and Exhibitor Information

Contact Name

Company

Address

City

State

Zip

Phone

Fax

Email

Website

Sponsorship Opportunities

- Keynote Speaker - **\$2,000**
- Wednesday Lunch - **\$2,000**
- Wednesday Dinner - **\$2,500**
- Thursday Lunch - **\$2,000**
- Tote Bag - **\$2,000**
- Break Sponsor - **\$1,000** per function
- Lanyards - **\$800**
- Tour Sponsor - **\$500**
- Tour Bag Insert - **\$200**

Exhibitor Opportunities

Please indicate number of tables

- 1 Display Table - **\$400**
- ___ 2 or more display tables - **\$350** ea.
- Additional Representative - **\$125** ea.

Exhibitor Meals

Please indicate number of tickets

- ___ Wednesday Lunch - **\$25** ea.
- ___ Wednesday Dinner - **\$60** ea.
- ___ Thursday Lunch - **\$25** ea.

Total: - \$ _____

Payment

- Credit Card

Type of Card

Card Number

Exp. Date

CVV

Zip

Name on Card

Signature

- Check

Please include this form with check payment. Copies of checks will not be accepted. **Payable to NYSACTE**. Remit to: Kimberly DeHart, 1204 Sandra Court, Schenectady, NY 12303 (in U.S. dollars and withdrawn from a U.S. bank)

- Purchase Order

Please include this form with PO. Your PO must have your organization's contact information and may include the company logo. Include complete bill-to and ship-to addresses, phone numbers, and emails. Include PO number and date. Include a complete product description with correct price.

PAYMENT POLICY

Full payment must be received with this agreement. Exhibit table cancellations made after April 1, 2018 will be nonrefundable. Cancellations made prior to April 1, 2018 will be refunded, less a \$100 administrative fee. Sponsorships are nonrefundable.

Signature

Date

Questions or further information contact: **Molly Bibisi** at
518-465-7085 ext. 142 or bibisim@adgcommunications.com