

Exhibitor Registration Opportunity 2016 Annual Conference

August 28-31, 2016

Radisson Blu at Mall of America – 2100 Killebrew Dr. – Bloomington, MN 55425

I am the AUTHORIZED REPRESENTATIVE (office contact person with address information) to receive all corresponding materials relating to Exhibits, Exhibiting at the 2016 ACFSA Conference in Minneapolis, MN. (* Indicates a REQUIRED FIELD) _____TITLE _____ *Mailing Address *City/State/Zip _____ *CONTACT PHONE ______FAX _____ _____Website _____ *Contact EMAIL *Contact for Publication in Program Book _____ *Phone for Publication _____* Email for Publication _____ 25 word description for publication: PLEASE SIGN ME UP TO EXHIBIT AT THE 2016 ACFSA ANNUAL INTERNATIONAL CONFERENCE IN MINNEAPOLIS. MN ACFSA Member \$1295 each Booth = Total Amount ____ Number of Corner Booths Corner Booths \$50 Additional Number of Booths = Total Amount ____ NON- Member \$1725 each Booth** Corner Booths \$50 Additional Number of Booths Number of Corner Booths *NEW! INFORMATIONAL TABLETOP DISPLAY ACFSA Member \$1145 each 6 foot table or High Top Table** = Total Amount ____ Number of Tables = Total Amount ____ NON- Member \$1575 each 6 foot table or High Top Table** Number of Booths Each Booth or Display receives 3 Complimentary full conference attendees. Additional Booth Personnel Registrations \$200 per person. Additional names and payment will be collected on name badge form closer to conference. Full Conference Personnel will have access to and are welcome to attend all Educational Sessions and Social Events **Non-Members pay the Member Booth Price if they JOIN ACFSA! ACFSA Membership \$384 Annually YES ____ I would like to be a Sponsor for the 2016 Conference! Minimum Contribution \$250 Exclusive Sponsorship Opportunities are available! Call (818) 843-6608 or visit www.ACFSA.org for details. I would like to be a Scholarship Sponsor for 2016 Conference! *Minimum Contribution \$250* Enter Sponsorship Amount I will need refrigerated storage (list approx # of boxes and estimate sizes – for planning purposes) GRAND TOTAL DUE FOR ALL SERVICES \$ NON-EXHIBITING VENDORS ARE NOT PERMITTED AT THE ACFSA CONFERENCE AT ANY TIME CANCELLATION DEADLINE IS MAY 31, 2016 - CANCELLATION REQUESTS MUST BE MADE IN WRITING ON OR BEFORE MAY 31, 2016 - NO REFUNDS WILL BE MADE AFTER THIS DATE PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS Questions? Call ACFSA at (818) 843-6608 Pay with a Check: Made Payable to ACFSA: Check Number Pay with a Credit Card: Visa MasterCard MasterCard American Express _____ Card #______ Name on Card_____ Expiration ______ V Code _____ Billing Address _____ Zip ____ Signature

Send Completed Form to: ACFSA, PO Box 10065, Burbank, CA 91510 If paying with a Credit Card, You may FAX your form to (818) 843-7423