



# Exhibitor Registration Opportunity

## 2017 Annual Conference

September 24-27, 2017

Town and Country – 500 Hotel Circle North. – San Diego, CA

I am the AUTHORIZED REPRESENTATIVE (office contact person with address information) to receive all corresponding materials relating to Exhibits, Exhibiting at the 2017 ACFSA Conference in San Diego, CA. (\* Indicates a REQUIRED FIELD)

\*NAME \_\_\_\_\_ TITLE \_\_\_\_\_

\*Company/Organization \_\_\_\_\_

\*Mailing Address \_\_\_\_\_

\*City/State/Zip \_\_\_\_\_

\*CONTACT PHONE \_\_\_\_\_ FAX \_\_\_\_\_

\*Contact EMAIL \_\_\_\_\_ Website \_\_\_\_\_

\*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 2017 ACFSA ANNUAL INTERNATIONAL CONFERENCE IN SAN DIEGO, CA

ACFSA Member \$1295 each Booth \_\_\_\_\_ +\$50 \_\_\_\_\_ = Total Amount \_\_\_\_\_

**Corner Booths \$50 Additional** Number of Booths \_\_\_\_\_ Number of Corner Booths \_\_\_\_\_ Total \_\_\_\_\_

NON- Member \$1725 each Booth\*\* \_\_\_\_\_ +\$50 \_\_\_\_\_ = Total Amount \_\_\_\_\_

**Corner Booths \$50 Additional** Number of Booths \_\_\_\_\_ Number of Corner Booths \_\_\_\_\_ Total \_\_\_\_\_

### INFORMATIONAL TABLETOP DISPLAY

ACFSA Member \$1145 each 6 foot table or High Top Table\*\* \_\_\_\_\_ = Total Amount \_\_\_\_\_

Number of Tables \_\_\_\_\_ Total \_\_\_\_\_

NON- Member \$1575 each 6 foot table or High Top Table\*\* \_\_\_\_\_ = Total Amount \_\_\_\_\_

Number of Booths \_\_\_\_\_ Total \_\_\_\_\_

*Each Booth or Display receives 3 Complimentary full conference attendees. Additional Booth Personnel Registrations \$250 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 \_\_\_\_\_ Total \_\_\_\_\_

I would like to be a Sponsor for the 2017 Conference! *Minimum Contribution \$250* YES \_\_\_\_\_ Total \_\_\_\_\_

*Exclusive Sponsorship Opportunities are available! Call (818) 843-6608 or visit www.ACFSA.org for details.*

I would like to be Scholarship Sponsor for 2016 Conference! *Minimum Contribution \$250* YES \_\_\_\_\_ Total \_\_\_\_\_

I will need refrigerated storage \_\_\_\_\_ (list approx # of boxes and estimate sizes – for planning purposes)

**GRAND TOTAL DUE FOR ALL SERVICES \$ \_\_\_\_\_**

Pay with a Check: *Made Payable to ACFSA:* Check Number \_\_\_\_\_

Pay with a Credit Card: Visa  MasterCard  American Express

Name on Card \_\_\_\_\_ 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 completed form to **(818) 843-7423**

**NON-EXHIBITING VENDORS ARE NOT PERMITTED AT THE ACFSA CONFERENCE AT ANY TIME**

CANCELLATION DEADLINE IS **MAY 15, 2017**

CANCELLATION REQUESTS MUST BE MADE IN WRITING ON OR BEFORE **MAY 15, 2017 - 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