



Team Concept Conference Exhibitor Registration Form

Name _____

Title _____

Company Name _____

Company Product _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

E-mail _____ Website _____

Title Sponsor (\$15,000)

Exhibitor Single booth Prime booth (\$600) Corner booth (\$750) Double booth (\$1000)

Add-ons Upgrade to full page ad (\$350) Purchase additional full page ad (\$550) Bag Sponsor (\$300)

Conference Book Underwriter (\$6000) Conference Book Contributor Full page (\$900) Half page (\$450)

Breakfast Sponsor (\$6500) Friday Saturday Share with one other vendor _____

Break Sponsor Sponsor (\$6500) Thursday afternoon Friday AM Friday PM

Saturday AM Saturday PM Share with one other vendor _____

Electricity and other services are contracted directly with the hotel. Forms attached.

Payment:

Bill Credit Card Type: VISA MasterCard Discover AmEx

Number _____ Exp Date _____

Signature _____ SCode _____

Total: \$ _____

Client Signature _____ Date _____

SPTS Signature _____ Date _____

Mary Wilkinson, Director of Marketing

Exhibitor space is offered first come, first served. Exhibitor space is not finalized until payment is received. For payment arrangements, please contact Mary Wilkinson, Director of Marketing at mwilkinson@spts.org or 317.501.0805.