

REGISTRATION FORM

Individual _____

Exhibitor _____

Name: _____

Company/Organization: _____

(Print exactly as you want it to appear on all trade show signage and publicity.)

Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

In order to ensure your registration, it must be received no later than July 22, 2009.

REGISTRATION COSTS:

TAMACC Members

Non Profit Organizations/Government Agencies

Future Members:

Exhibitor	\$400	\$600
Individual	\$200	\$275

EXHIBIT SPACE: Exhibit cost includes *one standard 10' x 10' space, * background drapes and side drapes, *booth identification sign, *booth number, *one 8' skirted table, *two folding chairs, *and one Individual Registration Packet that can be used by one person to attend all convention events (except where indicated). It is the responsibility of the exhibitor to pay for the cost of floor covering (fully carpeted) and utility requirements for the space(s) leased, and exhibitors will be contacted separately by the convention decorating company for orders. Exhibit placement is solely decided by TAMACC. **To have your booth listed in the convention magazine, your contract and payment must be received by July 10, 2009.** Additional Individual Registration Packets must be purchased if admission to all convention events is desired. Individual tickets to individual events may be purchased in advance or at the registration booth during convention.

Name of individual to receive Individual Registration Packet: _____

Each company will be issued 5 badges for their booth workers aside from the Individual Registration Packet. These five individuals will not receive tickets to any events. Please list company personnel to be issued booth worker badges. Please note the name of the individual in charge of the exhibit/consumer booth if different from the person receiving the Individual Registration Packet.

1. Person in charge of booth: _____
2. _____
3. _____
4. _____
5. _____

TERMS AND CONDITIONS:

REGISTRATION: Cancellations made before **July 10, 2009** will be charged 15% of the registration fee. No refunds will be given for cancellations received after **July 10, 2009**. All cancellations must be made in writing and postmarked, faxed or emailed no later than **July 10, 2009**. This contract will not be binding against TAMACC in the event of any strike, lockout, injunction, act of war, act of God, emergency declared by any government agency or any other circumstances beyond the control of TAMACC. TAMACC is not responsible for replacing lost or stolen tickets. **A 10% late fee will be added to all registrations not paid by August 15, 2009.** Registration forms without payment or a purchase order will not be accepted. Reasonable arrangements for persons with disabilities will be made, if requested by **July 10, 2009**. The Individual Registration Packet and the ticket book will entitle you to attend all TAMACC Convention activities.

METHOD OF PAYMENT: Check VISA MasterCard AMEX P.O. # _____ **Grand Total \$** _____

Credit Card Number: _____ Expiration Date: _____

Mailing Address and Zip Code for Credit Card*: _____

Signature: _____ **Credit card payments will not be accepted without proper billing mailing address and zip code for the credit card.*

EXHIBITOR ACCEPTANCE: The organization named above submits this application for exhibit space offered by TAMACC at the TAMACC 34th Annual Convention Business/Consumer Expo. *I, the duly authorized representative of the above-indicated organization, on behalf of said organization, subscribe and agree to all the terms and conditions contained in this application for exhibitor space and services.*

Name: _____

Title/Position: _____

Signature: _____ Date: _____

***Please Note:** Return this signed and completed application with the appropriate remittance to:
3000 South IH-35, Suite 305, Austin, TX 78704
Phone: (512) 444-5727 Fax: (512) 444-4929