

NAICC & WAPAC

2018 FOCUS ON PRECISION

Exhibitor & Sponsorship Form

SPONSORSHIP OPPORTUNITIES: The easiest way to make the most of your advertising dollars is to sponsor the premier meeting for the top crop consultants from WI and the surrounding area at the **2018 NAICC/WAPAC Focus on Precision Meeting, February 27-28 at the Sheraton Madison Hotel, Madison, WI.** As a sponsor, your company's name will be in the spotlight as we show our appreciation in the program materials, signage and from the podium. **Sponsors at the \$500 level and above** receive a table top exhibit space, one complimentary registration and recognition at the conference.

Platinum \$2500

Gold \$1000

Silver \$500

Bronze \$250

Conference Attendee(s): If registering people from various locations, please include names, addresses and contact numbers for **ALL** attendees. Attach additional copies of the contract if necessary. Each exhibiting company will receive one complimentary registration with each \$360 exhibit space. Additional registrations are \$180 per person and include name badge and admission to all meal functions, educational sessions and exhibit hall functions.

Price for one tabletop exhibit space is: \$360

PLEASE TYPE OR PRINT

EXHIBITOR REGISTRATION – Included in \$360 fee

ADDITIONAL REGISTRATIONS - \$180 EACH

Company Name _____

Company Name _____

Name _____

Name _____

Address _____

Address _____

City _____ State ____ Zip _____

City _____ State ____ Zip _____

Phone _____ Fax _____

Phone _____ Fax _____

E-mail _____

E-mail _____

For planning purposes, please indicate which meals you wish to attend.

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Tuesday, February 27 Continental Breakfast _____

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Lunch in Exhibit Hall _____

Lunch in Exhibit Hall _____

Social with light snacks & cash bar in Exhibit Hall _____

Social with light snacks & cash bar in Exhibit Hall _____

Wednesday, February 28 Continental Breakfast _____

Wednesday, February 28 Continental Breakfast _____

Lunch in Exhibit Hall _____

Lunch in Exhibit Hall _____

Enclosed Payment: All fees must be paid in US funds and must accompany the exhibit form in order to be processed.

\$ _____ for _____ exhibit space(s)

@ \$360 each

+ _____ for _____ additional registrations

@ \$180/person

+ _____ for sponsorship

= \$ _____ Total amount enclosed

Send completed form with payment to:

NAICC • P.O. Box 209 • Vonore, TN 38017 Phone:

(901) 861-0511 • Fax: (423) 264-0071

E-mail: AllisonJones@NAICC.org

Check enclosed (payable to NAICC)

or

Visa

MasterCard

American Express

Name on card: _____

Billing address if different from above: _____

Card Number: _____

Exp. Date: _____ Sec. Code: _____

Signature: _____