

Great Plains Green Expo-SDNLA

Booth Reservation Request

2018 Annual Conference & Trade Show

Best Western Ramkota Inn

I-29, Exit 81, Sioux Falls, SD

Trade Show Dates

Sunday-Tuesday, Feb. 4-6, 2018

Payment must accompany your booth request

Reservation must be made no later than

January 13, 2018

Firm _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-Mail Address _____

Name of individuals manning the booth

Extra 8' Table Required Yes ___ No ___

Electricity Required Yes ___ No ___

Student Assistance for Set-Up Yes ___ No ___

(You must register for student assistance, they will be assigned to a vendor to help them, otherwise set-up will be on your own)

Booth includes Mon. Lunch, Social, Tues Lunch for (1) person. Plan to purchase extra if needed.

Please indicate booth location preference

___ **Yes, we will be bringing an item for the SDNLA Scholarship Fund Benefit Auction**

Amount Enclosed

SDNLA 2018 Associate Dues (out of state) \$50.00 _____

SDNLA 2018 Active Dues (in state) \$150.00 _____

SDNLA 2018 Affiliate Dues-Extra Employees
from active member company Number ___@25.00 _____

*Applies to anyone who has not sent payment from previous dues billing

10'W x 8'D Booth \$350.00 _____

Non-member \$450.00 _____

20'W x 8'D Booth \$475.00 _____

Non-member \$575.00 _____

Extra Meal Tickets Mon Lunch No ___ @\$15.50 _____

Social No ___ @\$16.50 _____

Tues Lunch No ___ @\$15.50 _____

Yearbook Ad _____ (See rate sheet)

Convention Newsletter Ad _____ (See rate sheet)

Sponsored Events

Morning and Afternoon Breaks

Full Sponsor \$600.00 _____

Half Sponsor \$300.00 _____

Craft Beer/Wine Sponsor 300.00 _____

(more than one company can help sponsor these events)

Speaker Sponsor

\$500.00-\$1500.00 _____

TOTAL ENCLOSED _____

Payment method: _____ **Check** _____ **Credit Card**

Type of Credit Card ___ **VISA** ___ **MC** ___ **AMEX** ___ **Discover**

Credit Card Number _____

Expiration Date _____ **CVV 3 Digit Code** _____

Name on Card _____

Address Card Billing is Sent to _____

City _____ **State** _____ **Zip** _____

Please Remit to: Signature _____

SDNLA