

Application for Exhibit Space

The North Coast Annual Spring Meeting
Corporate College East, Warrensville Heights
Wednesday, May 6, 2020

INSTRUCTIONS: Type or print this application. Sign and return one copy with the required rental fee per spaces selected.

SUBMIT APPLICATIONS: Mail: North Coast Spring Meeting, Inc.
One Independence Place
4807 Rockside Road, Suite 270
Independence, OH 44131
Phone: 440-717-1891 Fax: 440-717-1894
Email: info@northcoastspringmeeting.com

To be governed by all other terms, conditions, rules and regulations as set forth in the official printed prospectus, a copy of which we have received.

Firm: _____

Phone #: (_____) _____ Fax #: (_____) _____

Address _____

City, State & Zip _____

By _____ , _____
(SIGNATURE) (Title)

Printed Name _____ (E-mail) _____

You are hereby authorized to reserve space(s) for our occupancy in the Exhibit Hall. We agree to pay the North Coast Spring Meeting, Inc. a rental charge of: ☐ \$1,500.00 or ☐ \$465.00.

Electricity Needed: ___ Yes ___ No
(Include \$25.00 electricity fee with payment)

Exhibit Table(s) Choice (See floor plan on back cover)

First Choice # _____ Second Choice # _____
Third Choice # _____ Fourth Choice # _____

1. Please indicate below the EXACT copy you wish to appear in the On-Site Brochure:

Firm or Trade Name _____

Address _____ Phone #: (_____) _____

2. Names of Representatives attending meeting:

1. _____ 2. _____

Names of additional Representatives at \$25.00 per person (payment must be included)

1. _____ 4. _____
2. _____ 5. _____
3. _____ 6. _____

3. Please list below all products you plan to exhibit (underline products that will be featured).

Information provided will appear in the On-Site Brochure

The information requested above will assist us greatly in making final booth assignments. We appreciate your cooperation in providing complete details.

CHECK # _____

CREDIT CARD # _____

EXP. DATE _____ CVV CODE _____

NAME _____

ZIP CODE ASSOCIATED WITH CARD _____

office use only

Space Assigned _____

PAYMENT RECEIVED DATE _____ \$ _____

Exhibitor Layout Room 206

