



# Be an Exhibitor at the 2018 CSBGA Tradeshow

## Tuesday, November 6, 2018

The Connecticut Building and Grounds Association invites you to exhibit at our 2018 Tradeshow on November 6 from 9:30 am — 1:30 pm at **Amity Regional School District #5, 25 Newton Road, Woodbridge, CT**. As an exhibitor, you'll have direct access to the buying power of many facility managers and staff from across Connecticut. This is a prime opportunity to demonstrate your products, explain your services, and evaluate competitive lines and equipment.

Submit the Exhibitor Registration form with your membership dues before **September 30, 2018** to take advantage of our **early-bird rates!** Space is limited and assigned on a first-come, first-served basis.

### Exhibitor Information

**ALL VENDORS MUST BE AN ASSOCIATE MEMBER OF THE CONNECTICUT SCHOOL BUILDINGS AND GROUNDS ASSOCIATION**

#### Table Price

If you register on or before September 30, the price for a single table is \$350. On or after September 30, the price for a single table is \$400. Additional tables may be reserved for a cost of \$200 per table.

You can renew your membership dues and register as a vendor at the same time. Please indicate on the form whether you will be renewing your dues at this time or if you have already submitted payment for your membership dues.

#### Electricity

Electricity is available if needed. Please indicate your need for electricity of the registration form.

#### Education

An education program for attendees will be held from 8:30 — 9:30 am. The attendees will be encouraged to visit the exhibits immediately following the session.

#### Lunch

A buffet lunch will be available. Lunch tickets are available for purchase at \$25/person. Please indicate on the form the number of tickets needed.

#### Door Prizes

Door prize winners will be selected throughout the day. Please indicate on the form if you will be donating a door prize.

#### Set-up Time

Vendors can set-up after 7:00 am. Displays must be ready for showing no later than 9:30 am. Any space unclaimed will be reassigned without refund.

#### Cancellations

The CSBGA must be notified in writing of any cancellation. There is a \$50 administrative fee for all cancellations received prior to November 1, 2018. There are no refunds after that date. The exhibitor agrees to protect, indemnify and hold harmless the CSBGA, its officers, directors, members and staff from any and all liability, loss, damage and expense resulting from the exhibitor's use of the exhibition space. In the event of cancellation due to fire, strikes, government regulations, or other causes beyond the CSBGA's control, the CSBGA shall not be held liable for the failure to hold the annual conference and exhibit as scheduled, and the CSBGA shall determine the amount of the exhibit fees, if any, to be refunded.

# CSBGA Exhibitor Registration Form

All CSBGA membership and correspondence will be directed to the individual listed below.

Company: *(as you would like it listed on the badge)* \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Street: \_\_\_\_\_  Home Address  Company Address

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Please provide a description of your products/service (approximately 25 words).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Exhibitor Staff Names** *(please print clearly)*:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Electrical Needs**

Do you need electricity?  Yes  No

**Raffle Prizes**

Do you wish to present a door prize?  Yes  No If yes, please describe: \_\_\_\_\_

**PAYMENT INFORMATION**

Quantity	Description	Fee	Total
1	2018-2019 CSBGA Membership Dues <input type="checkbox"/> Previously paid	\$200.00	
1	Table (on or before September 30, 2018)	\$350.00	
1	Table (after on or after October 1, 2018)	\$400.00	
	Additional table	\$200.00 per table	
	Lunch Tickets	\$25.00 per ticket	
<b>TOTAL DUE CSBGA</b>			

Full payment must accompany exhibitor registration form. Make checks payable to CSBGA and mail/fax with form to the address below. MC/VISA/AMEX are accepted.

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card *(print)*: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address *(if different than above)*: \_\_\_\_\_