

2012 Exhibitor Application & Sponsorship Form

Staple your business card or PRINT VERY CLEARLY

The following information will be reproduced in the Conference program

For additional information, visit our website at

www.njtransactionconf.com

Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____) _____

Email: _____ Web Site: _____

Contact Person: _____ Person Attending Conference: _____

Description of Product/Service: _____

Special Requests or Comments: _____

Credit Card Payments Accepted

Booth locations are assigned by the committee just before the event. *Co-sponsors of breaks or luncheons and reception receive choice of booth location.*

Important: Exhibit area is 7ft. wide x 6 ft. deep, if you need more than 7 feet width, you need 2 tables. **Set Up Time:** Wednesday 3 PM to 9 PM and Thursday 7 AM to 8 AM. **Expo Hours:** Thursday 8 AM to 3:30 PM and 5:15 PM to 7:30 PM and Friday 8 AM to 11:30 AM.

First Table: \$525 (after March 28 \$625) (includes one free full conference registration, 2 sumptuous lunches, 2 continental breakfasts, 4 refreshment breaks, networking reception, all sessions & attendee gifts) \$ _____

→ Display type: () table top **OR** () free standing floor model -- WIDTH: _____ feet (over 7 ft. you need 2 tables)

Additional Table: \$425 (after March 28 \$475) *does not* include a free full conference registration \$ _____

Additional Representatives: \$250 Each Attach separate sheet if needed. (All additional exhibitor representatives must be registered - includes for each a full conference registration, 2 sumptuous lunches, 2 continental breakfasts, 4 refreshment breaks, networking reception, all sessions & attendee gift).

1 Name (Print): _____ Email: _____ \$ _____

2 Name (Print): _____ Email: _____ \$ _____

3 Name (Print): _____ Email: _____ \$ _____

4 Name (Print): _____ Email: _____ \$ _____

Extra Lunch & Cocktail Reception Tickets: \$50.00 each
() Thursday Lunch, # tickets: _____; () Friday Lunch, # tickets: _____; () Thursday Reception, # tickets: _____ \$ _____

Sponsorships: Receive PRIME BOOTH LOCATIONS an special recognition in the program and at the Conference

Co-sponsor of all Refreshment Breaks & Continental Breakfasts: **\$850** \$ _____

Sole Sponsor of the Grand Reception *plus* Co-sponsorship of all Refreshment Breaks: **\$1,500** \$ _____
This sponsorship includes the opportunity to place your literature on each luncheon table

Co-Sponsor Thursday Luncheon with VIP's in Grand Ballroom: **\$500** \$ _____

Indemnification Agreement: The applicant named above shall abide by the regulations of the Tropicana Casino, Hotel, Conference Center for exhibitors at this event and will assume all risk of and responsibility for the his or her exhibit, and agrees to indemnify, defend, and save harmless the sponsors and co-sponsors of this transportation conference and its members and employees from and against any and all claims, demands, suits, actions, recoveries, judgments, costs, and expenses in connection therewith on account of the loss of life, property or injury or damage to the person, body or property of any person or persons whatsoever which shall arise from or result directly or indirectly from the exhibitors exhibit at this conference. This indemnification obligation is not limited by, but is in addition to the insurance coverage maintained by the applicant and the Tropicana Casino, Hotel, Conference Center.

Dryage Company Information - Material you cannot carry (i.e. large and/or heavy items) MUST be shipped using the hotel's drayage company, AEX Convention Services, 3089 English Creek Ave., Egg Harbor Twp. NJ 08234; (609) 272-1600, ask for Jeff Dye for shipping details and info. His email is: jeff@aexservices.com and fax is (609) 272-1680.

Email questions to Frank Reilly at: chairman@njtransactionconf.com

Total of all charges \$ _____

I would like to pay by credit card.
Please send a credit card invoice to my email at _____

Make check payable to: **NJ TransAction Conference**

Mail your check with this completed form to:

NJ TransAction Conference
460 Elm Street
Stirling, NJ 07980-1126

Federal Tax ID No.: 22- 3115847

Company Representative's Signature: _____ Date: _____