

NERGC 2019 EXHIBITOR'S BOOTH APPLICATION FORM

Exhibitor Information:

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Web URL: _____ Email: _____

Product Offerings: Please describe the types of products or services you will be exhibiting.

Primary Contact for Booth:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-Mail: _____

Name to appear on banner: _____

Booth Costs

The cost for the first booth is \$175 and \$125 per each additional booth(s)

There is an additional \$25 per booth for any registration postmarked/timestamped after 31 December 2018.

Each booth comes with a complimentary conference registration.

No. of booths requested: _____ 1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Is there an exhibitor you would prefer being located next to? _____

Is there an exhibitor you would prefer not to be located near? _____

Total Payment Due: _____ **Will your organization require an invoice?** _____

Payment Method: **Check:** _____ **or Credit Card:** _____

Payment by check: Please make check payable to New England Regional Genealogical Consortium, Inc.

Payment by credit card: Please do not include any credit card information. The processing of credit card payments is not yet available. If paying by credit card, instructions will follow at a later date.

Authorization:

I have read, understood and agree to abide by the Terms and Conditions of the NERGC 2019 Exhibitors Agreement.

Exhibitor's Signature

Date

Return this Exhibitor Application and check payment to:
Lorraine Roberts, 103 Grove Street #340, Rockland, MA 02370
or Janice Austin, 40 Darling Court, Rockland, MA 02370
Questions: nergcexhibits@gmail.com