



EXHIBITOR / SPONSOR REGISTRATION FORM
27th Annual Alabama Conference for Food Animal Veterinarians
February 23-25, 2018

DATE: _____

NAMETAG ONE: _____

NAMETAG TWO: _____

COMPANY NAME: _____

MAILING ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

PHONE: _____ FAX: _____

E-MAIL: _____

EXHIBIT REGISTRATION

[] Single Booth \$450.00 \$ _____

[] Industry Technical Seminar \$1000.00 \$ _____

Speaker Name: _____

[] Industry Technical Seminar + Booth \$1250.00 \$ _____

[] Additional Meal Voucher #__@ \$110.00 ea. \$ _____
(One Set of Meal Vouchers Included with Booth Fee. Includes Saturday steak dinner)

[] Additional Nametag #__@ \$25.00 ea. \$ _____

Name: _____

Name: _____

ACCOMMODATIONS

Occupancy in the 4-H Center motel is two per room. (All rooms are non-smoking) If you have a preference of roommate, please indicate that person below. If preference is NOT listed, rooms will be assigned as registrations are received (on first come, first serve basis).

Roommate Preference (if any): _____

**You may request a room to yourself, but please note that you will be charged the \$100.00.

Friday Night:

- [] Double Occupancy \$50.00
[] Single Occupancy \$100.00
[] Attendee with spouse \$100.00

Saturday Night:

- [] Double Occupancy \$50.00
[] Single Occupancy \$100.00
[] Attendee with spouse \$100.00

GRAND TOTAL \$ _____

METHOD OF PAYMENT

[] Enclosed is a check payable to the ALABAMA VMA [] MasterCard [] Visa

Card # _____

Expires ____/____ 3 Digit Code on Back of Card _____

Name on Card _____

Signature _____

PLEASE REGISTER ONLINE (ALVMA.COM) EMAIL, FAX OR MAIL BY FRIDAY, DECEMBER 15, 2017 TO:

reed.adele@gmail.com, Alabama VMA, Attn: CFAV, PO Box 803, Fayetteville, TN 37334 OR Fax:(931) 433.6289

CANCELLATION POLICY: All confirmed/contracted exhibit space cancelled by January 5, 2018 will be subject to a \$100.00 USD service charge per space. All cancellations after January 5, 2018 will forfeit the entire booth fee.