

**IAOPCC 48<sup>th</sup> Annual Conference Exhibitor Form**  
**September 26-28, 2019**  
**Gaylord Rockies Resort & Convention Center**  
**6700 North Gaylord Rockies Boulevard, Aurora, CO 80019**

**Company Information**

**Company Name** (as it should appear on all printed materials): \_\_\_\_\_

**Primary Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Packages** (All exhibits receive a 6-foot x 30-inch draped table with two chairs. Table Top Displays must fit within the space provided up to 6' wide)

**Please select one:**

**Package I** - \$949.00 (Includes 1 badge with conference registration and 6' x 30" exhibit table with two chairs)

**Package II** - \$1450.00 (Includes 2 badges with conference registration and 6' x 30" exhibit table with two chairs)

**Exhibitor Badge Information:** If known, please enter the names of your exhibit booth personnel below:

**Exhibitor 1:** \_\_\_\_\_ **Exhibitor 2:** \_\_\_\_\_

**EXHIBITORS MUST PURCHASE ADDITIONAL BADGE FOR GUESTS**

**Additional Items**

- **Second Table, Same Company (limited to one per company):** \$350.00 per table \_\_\_\_\_
- **Additional Exhibitor Badge:** \$499.00 per badge \_\_\_\_\_
- **Off-site Visit: Lasting Paws Pet Memorial Services (Saturday)** FREE \_\_\_\_\_  
*\*included with Exhibitor Registration – must register*
- **Post-Conference Off-site Visit: Evergreen Pet Cemetery at Evergreen Memorial Park (Sunday)** \$50.00 \_\_\_\_\_  
*\*not included with Exhibitor Registration – includes lunch - must register*

**TABLE Requests\***

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_

**\*All tables are assigned on a first-come, first-served basis.**

**Payment**

Total Registration Fee: \$ \_\_\_\_\_

Additional Items: \$ \_\_\_\_\_

**TOTAL DUE TO IAOPCC:** \$ \_\_\_\_\_

**Payment Type** (please select one):

**Check** - Please make checks payable to "IAOPCC", and mail to: IAOPCC, 390 Amwell Road, Suite 402, Hillsborough, NJ 08844

**Payment is due in full at time of registration. IAOPCC Federal Tax ID: 36-3015074**

**Credit Card:**  American Express  Visa  MasterCard  Discover

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

**Cardholder's Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

I agree to the IAOPCC Privacy Policy. For information on the IAOPCC Privacy Policy, please visit: [www.iaopc.com/page/privacy](http://www.iaopc.com/page/privacy)

**Please return the registration form to Kathleen Schaab via fax or mail.**  
**International Association of Pet Cemeteries and Crematories (IAOPCC)**

390 Amwell Road, Suite 402  
Hillsborough, NJ 08844

[www.iaopc.com](http://www.iaopc.com)

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