

# Seeing Beyond

Vision.  
 Leadership.  
 Action.

30<sup>th</sup>

Annual Legislative Conference  
 November 29 — December 3, 2006  
 Jackson Marriott Hotel :: Jackson, Mississippi

## 2006 Marketplace Reservation Form

In accordance with the exhibit regulations governing rental of exhibit space, the undersigned hereby applies for exhibit space at the NBCSL's 30th Annual Legislative Conference in Jackson, MS, November 29—December 3, 2006. We have read and agree to the exhibit regulations. We understand that these regulations are incorporated into the application by reference, and that this application becomes a contract when accepted and confirmed by NBCSL.

**PLEASE PRINT OR TYPE. CONTRACT MUST BE RETURNED AND PAYMENT COMPLETED BEFORE SPACE WILL BE ASSIGNED.**

Company Name [as you want your tabletop sign printed]

Contact Name

Alternate Contact Name

Address

Address

City / State / Zip Code

City / State / Zip Code

Email

Email

Phone

Fax

Phone

Fax

**EXHIBIT DESCRIPTION** [Please indicate the number of spaces you will need]

\_\_\_ Single booth size: 10'x6'

\*ID sign and 6' skirted table included for each space.

**EXHIBIT HOURS**

Tuesday, November 28

1:00 pm — 6:00 pm

Exhibitor Move-In/Setup

Wednesday, November 29

2:00 pm — 7:00 pm

Thursday, November 30 - Saturday, December 2

10:00 am — 7:00 pm

**EXHIBIT SPACE COST**

Market Place: \$500 Booth

**EXHIBIT SPACE PAYMENT**

All fees are due within 14 days of space approval. Space assignments will not be made until payment is received. **Space Reservation and payment deadline is October 30, 2006.**

**ATTENTION**

To participate in NBCSL conference events, registration and/or additional fees will be required.

**ACCEPTANCE OF TERMS**

I, the duly authorized Exhibitor Representative, have read the foregoing in its entirety and hereby subscribe and agree to the terms, promises, covenants and conditions in the Marketplace Exhibitor Contract.

Total Number of Spaces

Total Amount Due

Signature

Date

Credit Card Number

Expiration Date

Visa

Mastercard

AMEX

Name on Card

Authorized Signature

**PLEASE MAKE CHECK PAYABLE TO: NBCSL**

**MAIL TO:** NBCSL— Conference Exhibits

444 North Capital Street, NW, Suite 622, Washington, DC 20001

**FOR MORE INFORMATION CONTACT:**

NBCSL Exhibits (888)214-9144

exhibits@nbcsl.com