

EXHIBITOR REGISTRATION FORM

Florida Forestry Association

TRADE SHOW

September 7-8, 2011

Renaissance World Golf Village Resort

St. Augustine, Florida

www.worldgolfrenaissance.com

Company/Exhibitor: _____

Exhibitor Registrant Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____ Fax: _____ Email: _____

Please note that each Exhibitor registrant is bound by policies and guidelines as set forth by the Florida Forestry Association and Renaissance WGV Resort.

Signature of Representative: _____

Please register/check below as applicable:

\$650 (corporate rate) or \$335 (non-profit rate) plus (optional):

\$200 additional cost to indoor exhibitor requesting to place a tent and/or outdoor equipment on Resort parking lot (additional charges may apply depending on space requirements and # of pieces of equipment.)

\$195 spouse and/or additional (corporate only) registrant (# x \$195 = \$ _____)

\$90 per each golf registrant (# x \$90 = \$ _____) or \$360 to sponsor team

New this year: Golf Tournament at The Slammer & Squire is open to participating exhibitors, Annual Meeting registrants, and their invited guests.

List Handicap(s): _____ If requesting team placement, or sponsoring a team, please list additional team member name(s) if available:

Site Details: All exhibitors are provided with standard booth package inside 13,225 square foot St. Augustine DEFG Ballroom. Package includes 10' x 10', carpeted space, back and side draping, one 6' table, two chairs, and booth ID sign.

Additional Services/Assistance Available: Renaissance WGV Resort will provide additional (optional) services and assistance not included in the standard booth package (i.e., electricity, internet, drayage), at additional cost.

Annual Meeting registration forms including program details will be available at a later date. Participants whose company has registered as an exhibitor may register at that time separately, or can be included here by copying this registration form. Please specify one individual as the "Exhibitor", to whom all exhibit details will be mailed and is the primary contact for the booth.

Payment Options:

Please bill me

Check enclosed (payable to Florida Forestry Association)

Charge to: VISA MasterCard (a 3% convenience fee will be added to your total with credit card payment).

Card # _____ Exp Date _____

Name on Card _____

Cardholder's Physical Address _____

City/State/ZIP _____

Signature _____

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