

All exhibitors must pre-register their booth representatives by December 25th, 2017.



# 2018 EXHIBITOR BADGE & EVENT PRE-REGISTRATION FORM

January 10-11, 2018 • Hilton Garden Inn • Missoula, MT

**All Badges and Tickets will be available at Registration Desk**

USE THIS FORM TO REGISTER PEOPLE WHO WILL BE WORKING THE BOOTH AND ALSO SIGN UP FOR YOUR ONE COMPLIMENTARY CONVENTION ATTENDEE TICKET.

IF WE DON'T RECEIVE THIS FORM BY DECEMBER 25TH, YOU WILL HAVE TO HAND PRINT YOUR BADGE AT THE EXPO.

## EXHIBITOR BADGE REGISTRATION INFORMATION

Exhibiting Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Names of company representatives for **PRE-PRINTED NAME BADGES**. (4 per booth at no charge; each additional will be charged \$5 each)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

## SEMINAR REGISTRATION - ONE COMPLIMENTARY SEMINAR PASS PER BOOTH IS PROVIDED

Name of Company representative who will use the **COMPLIMENTARY SEMINAR PASS** (one per booth) also includes all meals, i.e. Luncheons, Banquet, and Breakfast of Champions:

1. \_\_\_\_\_

### ADDITIONAL SEMINAR ATTENDEES

If you have other employees or reps who are interested in registering for the seminars, please use the regular registration form included.

## ADDITIONAL SPECIAL EVENT TICKETS

**Special Event Tickets are not included in the fees for your booth for additional company representatives.** If you would like tickets for additional representatives or family members, please complete the information below.

Event	Price/Person	Qty. Requested	Total
<b>Luncheons</b> (No Charge to Exhibitors)	<i>(Please indicate # attending each luncheon. This will greatly help us to provide enough food.)</i>	___Wed. ___Thurs.	<b>N/C</b>
<b>Annual Banquet &amp; Entertainment</b> on Wednesday, January 10, 2018	<i>Before 12/15</i>	\$45	
	<i>After 12/15</i>	\$55	
<b>Total Due</b>			

### Payment Information *Payment is required at time of order. Credit card orders may be faxed to 406-633-2032.*

Check Enclosed     Visa     MasterCard

Credit Card Number: \_\_\_\_\_ Expiration Date: (mo./yr.) \_\_\_\_\_ CVV \_\_\_\_\_

Name Printed on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_

*Sorry, only Visa and MasterCard. All faxed orders must be pre-paid by credit card. All other orders should be mailed with payment by check. Payment is expected at time of order.*

**Montana Nursery & Landscape Association**

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