



EXHIBITOR CONTRACT

Please print or type the company information below and forward to MAKO c/o Chamber of Commerce Executives of Missouri; P.O Box 149; 428 East Capitol Avenue; Jefferson City, MO 65102 with payment.

CREDIT CARD [Click here if paying online by credit card and fax completed form to 573.634.8855, Attn: Ann Kleffner](#)

EXHIBITOR agrees to exhibit at the 2ND MAKO Four-State Conference event to be held Sunday, April 29 - Tuesday, May 1, 2012 at Big Cedar Lodge in Ridgedale, MO.

COMPANY/BILLING NAME _____

EXHIBIT INCLUDES:

- One 10'X10' exhibit space
- One 7"X44" ID booth sign with company name
- One 8' draped table
- Two chairs, one wastebasket
- Access to hospitality suite
- One registration throughout the conference

TOTAL PRICE PER EXHIBITOR: \$750 \$750 each \$750 X _____ = \$ _____

RESERVATION AND CANCELLATION DEADLINE: Friday, April 1, 2012*

EXHIBITOR CONTACT INFORMATION

NAME _____ TITLE _____

COMPANY NAME _____

STREET ADDRESS _____ SUITE # _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____ FAX _____

EMAIL _____

BOOTH SIGNAGE

List name as you would like it to appear on your ID booth sign in the spaces below:



ENCLOSED IS MY PAYMENT BY FRIDAY, APRIL 6, 2012:

CHECK (payable to Chamber of Commerce Executives of Missouri)

CREDIT CARD **MASTERCARD** **VISA** **AMEX**

CARD _____ EXP. DATE _____

CREDIT CARD BILLING ADDRESS _____ SUITE # _____

CITY _____ STATE _____ ZIP _____

PRINT NAME (AS APPEARS ON CREDIT CARD) _____

SIGNATURE _____

ADDITIONAL COSTS:

Additional booths	<input type="checkbox"/> \$375 each	\$375 x _____ = \$ _____
Extra 8' table with table cloth	<input type="checkbox"/> \$50 per table	\$30 X _____ = \$ _____

Total: _____

The terms and conditions below shall become part of this agreement.

SIGNATURE _____ DATE _____

PRINT NAME _____ TITLE _____

***CANCELLATION POLICY: ALL CANCELLATIONS MUST BE IN WRITING. REFUNDS WILL NOT BE ACCEPTED AFTER END OF BUSINESS FRIDAY, APRIL 13, 2012.**