



EXPO Registration Form: Reserving Exhibit Space Only

Register on-line at www.cbofm.org

Contact Person _____

Bank/Company _____

Address/city/state/zip _____

Email _____ Phone _____

Are you attending the convention? Yes No If not, who is onsite contact? _____

IMPORTANT NOTE: Exhibit fee **does not** include attendee registration fees. All company representatives (including spouses) must register using the attendee registration form.

ELECTRICAL REQUIREMENTS: (check one)

None 110 outlet Quad 110

Other electrical or telephone/data com requirements should be entered in the "special instructions" space and will be subject to additional fees.

DISPLAY AREA:

\$660.00 per display area (member) \$1,500 (non-member)

Please note that cost is based on one 8'x10' display area. The display areas for Expo 2018 will be adjacent to the main meeting room. Each display area includes one 2'x6' skirted table, two chairs, and a wastebasket. If you do not need the table or chairs, please advise CBM using the "special instructions" space provided. If your exhibit exceeds the space allotment, please reserve additional display areas. Any requested modifications should be included in the "special instructions" space and will be subject to additional fees.

SHIPPING: Instructions to follow

SETUP AND TAKE DOWN: Setup begins Wednesday, September 12 at 9:00a.m. and must be completed before 4:00p.m. that day. Takedown begins Friday, September 14 after Expo breakfast.

HOURS: Exhibits should be open during all breakfasts, Thursday general sessions, and receptions to maximize exposure.

EXHIBITOR SPACE IS LIMITED: Exhibitor space will be assigned as annual convention and expo registrations, including fees, are received. Space will not be assigned until payment is received.

MODIFICATION FEES: All modification fees should be included with the display area and registration fees and returned to the CBM. If you require an item not listed, please contact Art Craft Display directly at **616-791-8024** to confirm availability and price.

TO REGISTER

By mail: Community Bankers of Michigan, 3505 Coolidge Rd, Suite 200, East Lansing, MI 48823

By fax: 517.336.7833

Please make check payable to "Community Bankers of Michigan" Check # _____ Amount \$ _____

Please invoice me (**CBM members only**)

Credit card: (circle one) Visa MasterCard Discover Card# _____

Exp. date ____/____/____ 3-digit _____ Signature: _____

SPECIAL INSTRUCTIONS

Booth assignments will be provided two weeks prior to conference.

- \$660 Member
- \$1,500 Non-member

Additions:

- \$35 2'x4' table skirted
- \$45 2'x6' table skirted
- \$55 2'x8' table skirted
- \$25 to raise table to 42" high
- \$25 easels (each)
- N/C extra chairs

TOTAL \$ _____