**EXHIBIT SPACE**

Standard exhibit space is 10’ x 10’ (approx. 9 sq. meters) and package cost includes:

* Exhibit table, (2) chairs, and a single 110-electrical outlet\*
* 1 Registration ($550 value) with name badge and Exhibitor ribbon. **CONAHEC Members** receive two registrations.
* Conference-provided meals
* Recognition at Opening, and Closing sessions
* Acknowledgment in the printed conference program
* **Total Standard Exhibitor Package Cost = US $1,500.00**

**YES!** I want exhibit space for CONAHEC’s 17th North American Higher Education Conference. I am NOT a CONAHEC Member.

**YES!** I want exhibit space for CONAHEC’s 17th North American Higher Education Conference. I am a CONAHEC Member.

**Exhibit type (check one):**

|  |  |
| --- | --- |
|  | Tabletop |
|  | Free-standing floor display |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Company / Organization Name: | | | | | |  | | | | | | | |
| Name of Attendee: | | | |  | | | | | | | |  | |
| Name on Badge: | | | First Name | | | | | | | Family Name(s) | | | |
| Address: |  | |  | | | | | | | | | | |
| Street | | | | | | | | | | | City | | |
| State / Province | | | | | | | | Zip/Postal Code | | | | | Country |
| Telephone: |  | | | | | | Fax: | |  | | | | |
| E-mail address: | |  | | | | |  | |  | | | | |
| Special meals or other needs? | | | | |  | |  | |  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature |  |  | Date |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Second Attendee (ONLY FOR CONAHEC MEMBERS)** | | | | | | | | | | | | |  |
| Name of Attendee: | | | |  | | | | | | |  | | |
| Name on Badge: | | | First Name | | | | | | Family Name(s) | | | | |
| Address: |  | |  | | | | | | | | | | |
| Street | | | | | | | | | | City | | | |
| State / Province | | | | | | | Zip/Postal Code | | | | | Country | |
| Telephone: |  | | | | | Fax: | |  | | | | | |
| E-mail address: | |  | | | |  | |  | | | | | |
| Special meals or other needs? | | | | |  |  | |  | | | | | |

Once complete, please email the form along with a high quality logo image to [gvaldez@email.arizona.edu](mailto:gvaldez@email.arizona.edu)**.** An invoice with further instructions will be sent. **Payments need to be received on or by Friday, February 12, 2016.**

Questions/need instructions?

Contact Gabriela Valdez:

Telephone: (520) 621-7761

E-mail: [gvaldez@email.arizona.edu](mailto:gvaldez@email.arizona.edu)