

SPONSORSHIP & EXHIBIT APPLICATION

MARCH 22-24, 2015
HELENA COLONIAL HOTEL-RED LION,
HELENA, MT

SPONSORSHIP\$ _____

Sponsor code: _____

(see descriptions in the "Sponsorship Opportunities" section)

EXHIBITOR BOOTH WITH
CONFERENCE REGISTRATION \$ _____

\$350 (applications received by February 25, 2015)

\$400 (applications received after February 25, 2015)

\$140 Additional Representative Fee

\$210 Additional Booth Space

Special booth needs:

Electricity

Other _____

I will bring a Door Prize.

I/we plan to attend the Monday evening
banquet (# attending _____)

PAYMENT INFORMATION

Please send your payment via check or credit card. Please make checks payable to Montana Governor's Conference on Tourism and Recreation.

PAYMENT FORM (CHOOSE ONE):

Check Visa MasterCard Amex

\$ Amount _____

Card# _____

Exp. Date _____

Card Auth. Code _____

Cardholders Name (as printed on card) _____

Cardholder's Billing Address _____

City _____

State _____ Zip _____

Cardholder Signature _____

Date _____

An "X" in the box below serves as the electronic signature of the individual completing this Application and attests to the accuracy of the information above.

Completed By: Name and Credentials

SPONSORSHIP/EXHIBIT SPACE CONTACT PERSON

If you are an attendee please print or type your name as you would like it to appear on your badge.

First _____

Last _____

Company Name _____

Title _____

I am the attendee No, other representative(s)
listed below

Address _____

City _____

State _____ Zip _____

Phone (____) _____ Fax (____) _____

Email _____

Website _____

If you are a Sponsor eligible for additional complimentary registrations or an exhibitor with additional personnel attending, please list those people's names here (as they should appear on badge). Additional non-complimentary conference registrations are \$140 per person.

First _____

Last _____

Title _____

First _____

Last _____

Title _____

First _____

Last _____

Title _____

In order to hold your space, 100% of the amount due for the space must accompany this application.

TOTAL\$ _____

After your application has been processed, conference staff will send a letter of confirmation to the above-named contact person via email or mail. If you have reserved an exhibit space, a service kit will be sent to you from K&J Convention Services.

FOR ADDITIONAL INFORMATION OR IMMEDIATE EXHIBIT SPACE RESERVATION, CONTACT THE CONFERENCE MEETING PLANNER

RMS Management Services
36 S Last Chance Gulch, Ste A, Helena, MT 59601
406-443-1160 or skopec@rmsmanagement.com

PLEASE RETURN APPLICATION & PAYMENT TO:

Montana Governor's Conference on Tourism and Recreation
c/o RMS Management Services
36 South Last Chance Gulch, Ste A
Helena, MT 59601
Ph: 406-443-1160 Fax: 406-443-4614
Email: skopec@rmsmanagement.com
www.travelmontana.mt.gov/conference