SAGE SHOWCASE™

Supplier Registration 2009

Texas Week

☐ **Check Here To Exhibit For The Entire Texas Showcase Week ($100 deposit)**
Exhibit fee will be **$1.50 per attendee** when exhibiting for entire week with a maximum of $850 per week.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
March 16	March 17	March 18	March 19	March 20
Dallas	**Ft. Worth**	**Austin**	**San Antonio**	**Houston**
☐ **Exhibit** (By City) $250	☐ **Exhibit** (By City) $250	☐ **Exhibit** (By City) $250	☐ **Exhibit** (By City) $250	☐ **Exhibit** (By City) $250

☐ **Bus & Cargo Service:** $395 (Optional)
Shuttle service from city to city during the **entire show week** - includes cargo.

☐ **Cargo Service:** $225 (Optional)
Freight service from city to city during the **entire show week** (up to eight pieces).

EXHIBITING INCLUDES:
- 12' of table space
- Electricity
- Light snacks
- Attendee list via email

Reserve entire week: $_____
$100 deposit

Reserve by city: $250 per day X _____ = $_____
(full advance payment required) # of cities

Total bus/cargo fee: $_____

Extra 6' table: $50 per day X _____ = $_____
(limited availability) # of tables

Total Due $_____

Contact Information

Company

Line Name

Contact

Address

City State Zip

Phone Fax

Email

Payment Method

A minimum non-refundable deposit of $100 per Showcase week is due with registration. Exhibitor fee to be charged the week after each exhibiting week. Bus & Cargo Service will be charged 60 days prior to selected week. Exhibitor information will be sent 60 days prior to selected week. By using a credit card, I authorize SAGE® to charge the balance when due on my credit card for SAGE Showcase weeks.

Amount to be paid $_____ Balance Due $_____

☐ Check Mailed Separately ☐ Check Enclosed ☐ DISC/MC/VISA ☐ AMEX

_____ _____ / _____
DISC/MC/Visa/AMEX/Check Number Expiration Date

_____ _____
Name on Card Signature for Credit Card

Please locate and read the SAGE Showcase exhibition policies (rev 7/2008) ("Agreement") located at www.sageshowcase.com/legal. If you cannot access the Agreement for any reason, please call us before you sign and we will provide you with a copy. Your signature below indicates your acceptance of the entire Agreement on behalf of the company identified above and your representation that you have the authority to bind such company to the Agreement.

_____
Signature Date

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