

# EXHIBITOR FORM

2013 Annual Conference

October 2013 – Tampa

[www.redevelopment.net](http://www.redevelopment.net)

*Please write this information out as you want it to appear in the program...*

Company/Organization: Rep Services, Inc.  
Contact Name /Title Claire Almon, Marketing  
Address 585 Technology Park  
City Lake Mary  
State FL Zip 32750  
Phone 407-834-5585 Fax 407-831-9658  
E-mail Address claire@repservices.com

**PLEASE SEE ATTACHED SHEET FOR PROGRAM CONTACT INFO**

**Note: If you wish us to print different contact information in the conference program, please attach a separate sheet with details. For the use in the conference program, please indicate the products or services you will display (10 word maximum):**

**Please indicate any competitive companies.** We will try to recognize this in booth placement, but we cannot make any guarantees. **Booths are** assigned at the sole discretion of show management and will be on a **first-come, first-served basis**. When a floor plan for booths is finalized, we will contact you for your first and second choices.

**Booth Fee = \$1,000.00 each** # of Booths 1 ++\$50 if postmarked after **August 31**

**Acknowledgement:** I have read and am familiar with all rules and regulations regarding the FRA's Annual Conference contained in this packet. I agree to comply with all terms of this contract. Authorized Signature Claire Almon

**Amount Enclosed:** \$ \_\_\_\_\_ Check number (payable to **FRA**) \_\_\_\_\_

Visa Will call with credit card number MasterCard \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Cardholder's Name: ROBERT GEARY

Cardholder's Phone: 407-831-9658

Cardholder's Signature: Bill Geary

Billing Address (if different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**For FRA Use Only:** Date received \_\_\_\_\_ Confirmation sent \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_

# NAME BADGE FORM

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Please fill out the name badge information below.

Badges are provided in the following quantities:

Exhibitor, Break Sponsor or Session Sponsor:	2 Badges
Exhibitor/Break or Session Sponsor:	4 Badges
Exhibitor/Keynote Sponsor:	5 Badges
Exhibitor/Event Sponsor:	6 Badges

Our 4-line badges will be printed as follows: (please submit a form for each badge)

First Name/Nickname     **JT**    

Full Name     **JT Almon**    

Company Name     **Rep Services, Inc.**    

City that company is located in     **President**    

\*A person's title may be substituted for company location.

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Our 4-line badges will be printed as follows: (please submit a form for each badge)

First Name/Nickname Nathan

Full Name Nathan Almon

Company Name Rep Services, Inc.

City that company is located in Sales Consultant

\*A person's title may be substituted for company location.

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