

Exhibitor Registration Form

Company Information (please print):

Company Name: _____
(Please submit company name exactly as it should appear on all published Convention materials.)

Address: _____

City, State, Zip: _____

Website address: _____

Administrative Contact Information:

Contact Name/Title: _____

Contact Address: _____

City, State, Zip: _____

Contact Phone Number: _____

Contact Email: _____

*Company Description of Service/Product:

Please provide a brief description (50 words or less) of service/product for use in Convention Materials.
Must be received by April 10, 2009 to be included in the Notebook.

Company Group: (Choose One)

- Audit & Consulting
- Automotive Solutions
- Collections
- Compliance & Risk Management
- Data Processing
- EFT Services
- Facility Design
- Financial Services
- Human Resources
- Legal Services
- Lending Services
- Marketing Services
- Member Service Solutions
- Mortgage Services
- Network Security Services
- Operational Solutions
- Misc. _____

Make your company stand out! For an additional \$350, you can bold your company name & description in the 2009 Convention Notebook. Details on page two!

Booth Choices:

Booths are reserved on a first come, first served basis once payment has been received. To view the exhibit hall floor plan, go to www.fcul.org and click "FCUL Convention & Exposition" then click "Exhibitor Information."

First _____ Second _____

Third _____ Fourth _____

I would would not like to be placed next to the following vendor(s):

Booth Registration Fees:

Premium (Pink Booths on Map)

(Premium spacing is available on a first-come-first-served basis.)

Per booth:

Early

Before February 27, 2009

\$2,050

Regular

After February 27, 2009

\$2,250

Strategic (Yellow Booths on Map)

(Strategic spacing is available on a first-come-first-served basis.)

Per booth:

\$1,795

\$1,925

Standard (Blue Booths on Map)

(Standard spacing is available on a first-come-first-served basis.)

Per booth:

\$1,595

\$1,695

Booth registration fee includes two representatives. A maximum of two additional representatives may be added at \$175 per person. *(Includes Friday lunch.)*

White Booths on Map Are Reserved for Sponsors Only



Onsite Exhibiting Representative(s):

The following fields are required for each onsite exhibiting representative. List name(s) exactly as they should appear on name badges. All name changes received before May 29, 2009, are free-of-charge. **Representative changes after May 29, 2009, are at a cost of \$25/change.**

Onsite Appointed Official Representative: _____

Representative Title: _____

Representative Email Address: _____

2nd Representative: _____

2nd Representative Title: _____

2nd Representative Email Address: _____

Additional Representative(s) (\$175 per person):
(A maximum of four representatives are allowed per booth.)

Add'l Representative: _____

Add'l Representative Title: _____

Add'l Representative Email Address: _____

2nd Add'l Representative: _____

2nd Add'l Representative Title: _____

2nd Add'l Representative Email Address: _____

Lead Capture Solutions

This technology works with a hand-held, portable device that scans the Attendees card containing their contact information. All contact information is transferred to your account and allows instant access to the information via the Internet. No manual lead retrievals, no keeping up with business cards, it's all online for you to use.

Yes, I'd like to have a Lead Capture Device for \$175!

Bolded Company Name in Convention Notebook

Yes, I'd like to have my company's name stand out in the 2009 Convention Notebook for \$350!

Contract Agreement:

We hereby apply for exhibit space at the Florida Credit Union League's 2009 Annual Convention & Exposition to be held at the JW Marriott Orlando Grande Lakes on June 17-20, 2009, and agree to abide by all the requirements and restrictions in the Contract Terms and Regulations provided on FCUL's website at www.fcul.org and incorporated by reference herein. We understand that this is not a contract until officially accepted by the Florida Credit Union League, Inc. **The full rental fee must accompany the agreement.** A full refund of the booth rental price (minus \$250 cancellation fee) will be made upon written request received by the exhibit coordinator prior to May 1, 2009. A full refund of the booth rental price (minus \$500 cancellation fee) will be made upon written request received by the exhibit coordinator prior to May 15, 2009. A 50 percent refund will be made for cancellation requests received on or after May 15, 2009 but before June 1, 2009. No refunds will be made on or after June 1, 2009.

Accepted by Exhibitor: _____
Signature

Date

Accepted by FCUL: _____
Signature

Date



Booth Details

- Six Exclusive Exhibit Hours
- 8' x 10' Booth Space
- Side & Back Draping
- Two Chairs
- Booth Identification Sign
- Admission for Two Representatives with Friday Lunch
- Company Contact Information & Description in Convention Notebook
- Pre-Show List of Registrants
- Admission to Any Educational Session
- Admission to the General Session
- Exhibitor Hospitality Area (Drinks & Snacks)
- 24-Hour Exhibit Hall Security
- Group Room Rates at the Hotel

Booth Must Be Manned at All Times.

A Maximum of Two Additional Representatives May Be Added at a Cost of \$175 Per Person—Includes Lunch on Friday.

Children Under the Age of 18 Are Not Allowed in Exhibit Hall at Any Time.



Payment Information (required):

Company Name: _____

Contact Name for Accounting Questions: _____

Contact Phone Number: _____

Email Address: _____

Yes, I would like to make a donation to the Florida Credit Union Foundation!

Payment Summary

Booth Registration: \$ _____

Addt. Representative(s): \$ _____

Lead Capture Device: \$ _____

Bolded Company Name: \$ _____

Florida Credit Union Foundation: \$ _____

Total Amount Enclosed: \$ _____

Credit Card Authorization

Invoice Me

VISA MasterCard

(American Express and Discover are not accepted)

Credit Card Number

Card Exp Date

V Number (3-digit number on back of card)

Cardholder's Billing Address

City/State/Zip

Print Name

Authorized Signature

Return original with payment. Be sure to make a copy for your records.

Mail to: FCUL

Attn: Accounting - Exhibits

P.O. Box 3108

Tallahassee, FL 32315-3108

Fax to: 850.558.1105

Email to: expo@fcul.org

