

# 2017 ANNUAL CONFERENCE

## A SPECTRUM of Opportunities

SEPTEMBER 17-20

Marriott Shoals Hotel & Spa, Florence, Alabama



### EXHIBITOR AND PROFESSIONAL REGISTRATION FORM

Please complete this form and mail with payment to: Jeff Green, Morristown Housing Authority, P.O. 497, Morristown, Tennessee 37815. Make checks payable to TAHRA.

Company: \_\_\_\_\_

(This information will be used in the Exhibitors Directory and the Conference Program. Check spelling carefully.)

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Name and Title of Booth Representative(s):** Use back for additional names.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

**Booth Selection for Exhibitors:** Booths will be assigned at the sole discretion of TAHRA. We will attempt to place exhibitors so that direct competitors are not located in adjacent or nearby booths.

**Program Listing Information:** A brief description of your products and services will be included in the Annual Meeting Program if received by August 31, 2017. Please limit to 25 words (use back if necessary or attach separate description).

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Please check the applicable level of participation on this form. Please Print or Type.

	<u>Member</u>	<u>Non-Member</u>
<u>Exhibitor</u> (Booth, 1 Rep, tickets to all events)	\$550.00 [ ]	\$700.00 [ ]
<u>Professional</u> (1 Rep, tickets to all events)	\$450.00 [ ]	\$550.00 [ ]
<u>Additional Reps</u> (Exhibitor, Professional or Spouse – tickets to all events)	\$250.00 [ ]	\$300.00 [ ]

(Check appropriate bracket(s) above)

Total amount enclosed \$ \_\_\_\_\_

All reservations must be accompanied with full payment. Reservation fess are not refundable if cancelled after August 31, 2017.