

SBS 2010 EXHIBITOR REGISTRATION FORM

please e-mail this page or fax completed form to: 865-922-2715

Company Name: _____

Contact Person: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ Fax: _____

_____ Email: _____

Free Badges:

1. _____ 2. _____

3. _____ 4. _____

Booth/Table Space: _____ No. of Tables _____

Cost per Table: _____ x No. of Tables = \$ _____

(Cost per table is based on qty of tables – see Table Costs link in the “Information for Exhibitors” page)

Advertising Fee: \$ _____

(Includes print advertising, direct mailings, trade shows, emails, direct calling, webhosting & more!)

Additional Advertising \$ _____

(Refer to Additional Advertising in previous page, “Information for Exhibitors”;

Please fax Additional Advertising Form with marked selections, with this registration form)

Additional Furnishings \$ _____

(Refer to Additional Furnishings in previous page, “Information for Exhibitors”;

Please fax Additional Furnishings Form showing additional chairs, carpet, etc., with this registration form)

Total: \$ _____

Please Make Checks Payable to:

“Spring Book Show”

The Spring Book Show, 3517 Neal Dr., Knoxville, TN 37918

Or

Credit Card Number: _____ Exp. Date: _____

(VISA, MC, AMEX – **Include CID#** - Circle one)

Name: _____ Signature: _____

(please print)

Phone: 865-922-7490 Fax: 865-922-2715