

IT Summit: May 7-8, 2020

Vendor Registration



____ Yes, I understand that my registration will not be processed nor reserved until full payment is received by AIRI; that only check payments are accepted; and my company will not be included in promotional/marketing materials for the meeting until full payment is received. I understand that all sponsorships/exhibits are reserved on a first-registered basis and full payment must accompany order.

Signature of Contact Name (must be signed to process): _____

Company Name:
Contact Name:
Contact Title:
Address:
City, State, and Zip:
Phone:
E-mail:

Vendor Registration

Vendor registrations are for employed staff of the vendor organization. All vendor representatives must register, and may not be transferred or divided up between more than one person or company. Visit us online for complete benefits for each option at www.airi.org. Refund requests will be honored if received on or before March 20, 2020. A \$500 refund charge will apply. Refund requests received on or after March 20, 2020 cannot be honored.

Sponsorship/Exhibit	Early Rate	Rate	
	On/before Mar 20	After Mar 20	
Option 1: Sponsorship (Welcome Reception)	\$ 5000	\$6000	_____ \$_____
Option 2: Sponsorship (Lunch)	\$ 5000	\$6000	_____ \$_____
Option 3: Sponsorship (Breakfast)	\$ 3500	\$4500	_____ \$_____
Option 4: Sponsorship (Refreshment Break)	\$ 2500	\$3500	_____ \$_____
Option 5: Exhibit	\$ 2500	\$3500	_____ \$_____
Add-Ons:			
Add additional staff registrations	\$ 500	\$ 500	_____ \$_____
Add an ad in an AIRI E-mail blast	\$ 500	\$ 500	_____ \$_____
Add an exhibit	\$ 1000	\$1000	_____ \$_____
GRAND TOTAL DUE:			\$_____

If you are registering staff, please complete the second page of this registration form with your staff's name, title, email, and phone number. Please return this form with a check (*payable to AIRI*) for the total amount due to: AIRI Management Office, Attn: David Issing, P.O. Box 844, Westminster, MD 21158. For more information, visit www.airi.org or contact AIRI Headquarters at hq@airi.org or (410) 751-8900.

ON-SITE STAFF 1:

FIRST NAME _____ LAST NAME _____

TITLE _____ EMAIL _____

ON-SITE STAFF 2 (additional rates may be applicable):

FIRST NAME _____ LAST NAME _____

TITLE _____ EMAIL _____