



2018 Write to Learn Exhibitor Registration Form

“E³: Engagement, Empathy, Empowerment”

February 15-17, 2018 ~ Tan-Tar-A Resort ~ Osage Beach, MO

For Office Use Only Cvent: 8YNHHJQYBW5 Confirmation # _____

Agency/Company Name (as it should appear in conference materials): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Personal Email Address: _____

Telephone: (____) _____ Web Site: _____

Authorized Representative(s) (two are included in fee, all additional representatives are \$25 each.) _____

Description of materials to be exhibited: _____

Yes, I plan to donate a door prize.

Choose Exhibit Level: 8'x10' booth price includes signage, one 6' X 30" skirted table and two chairs. Wifi is complimentary.

For additional equipment, contact Tan-Tar-A (Sales@tan-tar-a.com).

LEVEL	1st booth space	2nd booth space	Additional booth spaces	Level Total
Conference Sponsor				
Any Type	<input type="checkbox"/> \$500	<input type="checkbox"/> add \$250	<input type="checkbox"/> \$125 x # ____ = \$ ____	\$ ____
Gold				
Textbook Publisher	<input type="checkbox"/> \$300	<input type="checkbox"/> add \$150	<input type="checkbox"/> \$75 x # ____ = \$ ____	\$ ____
For Profit/Retail	<input type="checkbox"/> \$150	<input type="checkbox"/> add \$75	<input type="checkbox"/> \$50 x # ____ = \$ ____	\$ ____
Non-Profit	<input type="checkbox"/> \$100	<input type="checkbox"/> add \$50	<input type="checkbox"/> \$25 x # ____ = \$ ____	\$ ____
Silver				
Textbook Publisher	<input type="checkbox"/> \$200	<input type="checkbox"/> add \$100	<input type="checkbox"/> \$50 x # ____ = \$ ____	\$ ____
For Profit/Retail	<input type="checkbox"/> \$100	<input type="checkbox"/> add \$50	<input type="checkbox"/> \$25 x # ____ = \$ ____	\$ ____
Non-Profit	<input type="checkbox"/> \$75	<input type="checkbox"/> add \$50	<input type="checkbox"/> \$25 x # ____ = \$ ____	\$ ____

Electrical Outlets Needed # of outlets ____ x \$ 50 = \$ ____

Additional Representatives (over 2)..... # of additional reps. ____ x \$ 25 = \$ ____

Additional Skirted Table # of additional tables ____ x \$ 24 = \$ ____

Total Payment (Level + Additional Needs)..... \$ ____

Ways to Register:

Online at: writetolearnconference.com

Mail or fax completed form and payment information to: Write to Learn Conference, 344 Hearnes Center, Columbia, MO 65211;

Fax: (573) 882-1953 or **phone** at (573) 882-4349 or 866-682-6663. **Form and payment must be received by January 24, 2018.**

For security reasons, emailed forms containing credit card information WILL NOT BE PROCESSED. Refunds for cancellation possible with written request received by **February 2, 2018.**

Method of Payment:

Payment enclosed (Payable to University of Missouri)

Credit Card: MasterCard Visa Discover AMEX

Printed Cardholder's Name _____

Authorized Signature _____

Address if Different than Registrant _____

Card # _____ Exp Date ____ / ____