# PMCA Member Booth Reservation Form

Monday, April 12, 2021 • 12:30pm - 5:00pm Freedom Hall

PMCA Member Company Inform	ation		
Company Name:			
Company Web Address:			
Exhibit Contact Information			
Exhibit Contact:* <i>This person will receive all confirmation</i>	Telepho	one:	
Exhibit Contact Email:			
Press Information			
Exhibit Pamphlet Company Description <i>*Describe your business (maximum of 1.</i>	<b>2 words</b> ) as it relates to the confectione	ery industry.	
Press/Proceedings Company Description *Describe ( <b>short paragraph</b> ) what your b		upplier Show.	
	ns can be submitted by email to <u>Brandy.</u> use your description from 2019 please		
	use your description from 2019 please	note use 2019 description .	
Booth Information Please choose a booth size and include re	equested booth spaces below.		
10x10 Booth: \$970.00	10x20 Booth: \$1,195.00	10x30 Booth: \$1,395.00	
Booth # Request 1:	Booth # Request 2:	Booth # Request 3:	
been exhibiting. PMCA will make every pick. If we are unable			

## Attendee Information

Your booth reservation comes with 1 complimentary full conference registration and unlimited hall passes for your employees.

You can also register additional attendees anytime online by visiting <u>www.pmca.com/production-conference</u>.

## Complimentary Full Conference Registrant

\*Access to all technical events, exhibition and including hosted meals

First & Last Name	Title	Email	City, State

#### Hall Pass Registrants

\*Access to Supplier Hall ONLY which includes hosted lunch and cocktail reception after close of show

First & Last Name	Title	Email	City, State

### Payment Information

\_\_\_\_\_ Check made payable to "PMCA" enclosed in U.S. funds drawn on a US or Canadian Bank

Credit Card Payment	VISA	MasterCard	American Express
Card Number:		Exp. Date:	CVV Code:

\*Booth Cancellations received by **February 17, 2020** will be refunded less \$50.00 cancellation fee. No refunds will be given after **February 17, 2020** and the fees can not be transferred.

#### Please return completed form with payment to:

PMCA PO Box K • Bath, PA 18014 Fax: (610) 625-4655 Email: <u>Brandy.Kresge@pmca.com</u>

FOR PMCA USE	Date Received:	Received By:	Date Paid:
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