



### MOARC Trade Show Registration Form



Company Name \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail \_\_\_\_\_  
 Description of Product or Service \_\_\_\_\_  
 Name of Attendee(s) (1) \_\_\_\_\_ (2) \_\_\_\_\_

YES, I am including my COMPANY's \$275.00 annual MOARC Supplier/Vendor Member dues, please reserve my complementary free Trade Show 10'X10' booth space at the MOARC Spring Convention. \$ \_\_\_\_\_

YES, I am including my COMPANY's \$275.00 annual MOARC Trade/Vendor Member dues, however I am not able to attend the trade show but will provide conference Display or Brochures Inserts for Trade Show with donated item for our live auction. \$ \_\_\_\_\_

Trade Show Lunch Tickets (Complimentary) Event Evening Banquet Tickets Quantity \_\_\_\_\_ @ \$30.00 \$ \_\_\_\_\_

YES, MY COMPANY WILL donate a fund raiser AUCTION ITEM.  
 Item Description: \_\_\_\_\_

**TOTAL Amount Due \$ \_\_\_\_\_**

Select Payment Method _____ Check (enclosed) ___ Visa ___ MasterCard ___ Discover _____ Amount \$ _____
Card # _____ 3-digit code (on back of card): _____
Exp. Date: ____/____/____ Name on Card: _____
Zip Code of Billing Address: _____ Card Holder's Signature: _____

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

Please return completed Form and payment to MOARC, 18712 Cliff Rd, Dixon, MO 65459, Fax completed form to (573) 759-2623 or Scan and Email to : [morvcamp@gmail.com](mailto:morvcamp@gmail.com)

To reserve your conference hotel room call the Oasis Hotel at (417) 866-5253. Rate: \$87 plus tax, <http://springfieldoasis.com/> (Group Code: MOARC) Reserve at this rate before Feb. 10, 2018.