

# MISSISSIPPI DAMAGE PREVENTION SUMMIT

Monday, Nov. 7 through Wednesday, Nov. 9, 2011  
MS Coast Coliseum & Convention Center  
Biloxi, MS

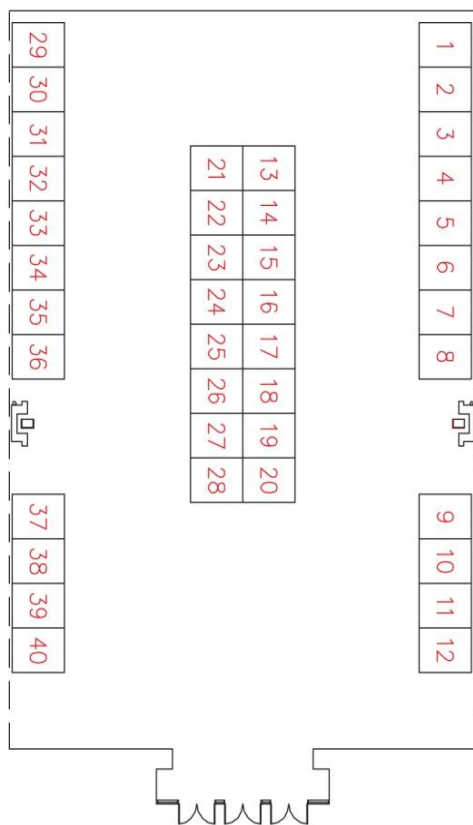


## EXHIBITOR INFORMATION

### Exhibit booth signup & number assignments

The exhibit booth registration fee provides the following: 8' x 10' pipe and drape display area, 8' table with skirt, 2 chairs, exhibitor sign, small wastebasket and one complimentary name badge and entry to all meals and sessions (excluding workshops). Power is included.

Please refer to the floor plan below and indicate your first three choices on the on the registration form. If requested selections are not available, the next best available space will be assigned. Sponsors will get first preference.



### Other exhibitor needs

Additional name badges - must be purchased for each additional person besides exhibitor. Badges needed for entry to meals and sessions.

For more information, go to [www.summit.msdamageprevention.com](http://www.summit.msdamageprevention.com) or email [thesummit@aligningchange.com](mailto:thesummit@aligningchange.com)

### Exhibit Hall setup & teardown

Set up - 1:00pm, Monday, Nov. 7

Exhibit Hall opens - 5:30pm that evening for the Meet & Greet

Teardown - Wednesday, Nov. 9. No teardown before 10:30am. All materials must be out by 12:30pm.

## ROOM RESERVATIONS

We have reserved a block of guest rooms at the Four Points by Sheraton Biloxi Beach located just down the road from the Convention Center. Room rates are \$99/night for City View and \$114/night for Gulf View. Reservations must be made by October 6, 2011, to receive this rate. For reservations: 1-800-368-7764. Make sure to state this is with the **event: "MS Damage Prevention Summit" or Group Code: MDP06A** to receive this special group rate.

# EXHIBITOR REGISTRATION



**MS Coast Coliseum & Convention Center**  
 Monday, Nov. 7 - Wednesday, Nov. 9, 2011  
 Biloxi, MS

Primary Contact \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Booth preferences: 1<sup>st</sup> choice \_\_\_\_\_, 2<sup>nd</sup> \_\_\_\_\_, or 3<sup>rd</sup> \_\_\_\_\_ [refer to floor plan]

**EXHIBITOR NAMES:**

(As it would appear on name badges, first badge is included in cost of exhibit booth)

**Addl. Badges**  
 (\$175/addl. person)

**Competent Person Training Workshop**  
 (\$100/person)

**Utility Locator Training Workshop**  
 (\$250/person)

**Golf**  
 (\$85/person)

Primary _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addl _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addl _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addl _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addl _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addl _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**TOTALS:** \_\_\_\_\_

Exhibit Booth (includes one name badge)  \$550  
 Check for power to booth  (after 10/7/11)  \$625 \_\_\_\_\_

Total Additional Badges \_\_\_\_\_ x \$175 = \_\_\_\_\_  
 Total Competent Person Training Workshop \_\_\_\_\_ x \$100 = \_\_\_\_\_  
 Total Utility Locator Training Workshop \_\_\_\_\_ x \$250 = \_\_\_\_\_  
 Total Golfers \_\_\_\_\_ x \$85 = \_\_\_\_\_

Total Amount Due (by 10/14/11): = \_\_\_\_\_

Pay by check (Payable to ACTS)  
 Pay by credit card (Enter information or register online at [summit.msdamageprevention.com](http://summit.msdamageprevention.com))  
 Type \_\_\_\_\_  
 Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_  
 Name on card \_\_\_\_\_  
 Billing address (if different from above) \_\_\_\_\_  
 Charge will show as *ACTS NOW* on statement

*Terms & Conditions:*  
 Exhibitors cancelling before September 23, 2011 will receive a refund of their fees, less a non-refundable \$100 deposit. No refunds will be issued after September 23, 2011.

Please send completed form to:  
**ACTS Now, Inc.**  
 PO Box 644  
 Conway, AR 72033  
 Fax (501) 548-6969