



2010
Meeting - Sharing - Doing

DUE 11/5/10

APPLICATION
NAEP-TAGM Vendor Exposition to be held December 6, 2010
(Please type or print)

Company or Organization _____
Address _____ City _____ State _____ Zip _____
Name _____
Title _____
Phone _____ Fax _____ Email _____
Authorized Signature _____

Names of personnel who will staff the booth: _____
Name: _____ Name: _____
Title: _____ Title: _____
Number of tables desired _____ x \$650.00 = \$ _____ Amount enclosed for table (s)
The booth fee above entitles each vendor to their booth space during the exhibit, and <u>1 guest pass</u> to the Sunday night Welcome Reception and 1 guest pass to the Vendor Expo reception. Any additional tickets are \$75 each for the Welcome Reception and \$35 each for the Vendor Reception.
<u>Total</u> number of people from your company attending the Sunday night Welcome Reception: _____
Number of additional tickets desired _____ x \$75.00 = \$ _____ Amount enclosed for additional tickets
<u>Total</u> number of people from your company attending Monday Vendor Expo Reception: _____
Number of additional tickets desired _____ x \$35.00 = \$ _____ Amount enclosed for additional tickets
Please RSVP to Larry McCalop by email at lmccalop@gsu.edu or by phone at (404) 413-3156 with the number attending the above events by November 5, 2010.

PAYMENT INFORMATION:	
TOTAL AMOUNT ENCLOSED \$ _____	
_____ CHECK ENCLOSED <small>*make checks payable to: NAEP-TAGM Region</small>	_____ CREDIT CARD PAYMENT <small>(5% credit card processing fee)</small>
Cardholder Name: _____	
Cardholder Address: _____	City/State/Zip: _____
Card Type (please circle): VISA Mastercard AMEX	
Credit Card Number: _____	Expiration Date: _____
Signature of Cardholder: _____	Today's Date: _____

**Please return completed form and payment to: Larry J. McCalop, Georgia State University, Purchasing Department,
P.O. Box 4016, Atlanta, GA 30302-4016**