



New Jersey | Independent Electrical Contractors

21 Commerce Drive, Suite 202 Cranford, NJ 07016

973-467-0027 ~ www.nj-iec.org

EXHIBITOR REGISTRATION FORM - TABLE TOP TRADE SHOW

December 5, 2017

Ariana's Grand, 800 Rahway Avenue, Woodbridge N.J. 07095

Company Name _____

Address _____

City _____ State _____ Zip Code _____

Contact Name & Title _____

Contact Phone _____ Contact Email _____

Exhibitors will receive a table and two chairs to display their materials/products. If electric is needed please indicate. Please submit company logo in high-resolution electronic format (.eps file or Adobe Illustrator) to Diana Gann, dgann@nj-iec.org

Manufacturer's Reps: One manufacturer per table only. Encourage all manufacturers you represent to participate.

Distributors: No display of manufacturer items allowed. In the past there has been too much duplication of product. Come tell electrical contractors what makes your company the best choice to do business with.

Factory Direct Sales Force: Display products.

Cost: **\$500.** *It is also suggested all exhibitors donate a door prize minimum \$50 in value. The earlier the door prize is disclosed the more promotion you will be able to receive. To be included in all on site materials, contract with full payment and door prize commitment must be made to NJ-IEC no later than November 20, 2017.*

Sponsor: **\$1,500.** *Prominent placement in all pre-show promotion and on-site as well as exhibit space as detailed above.*

Door Prize: _____

Schedule:	10:00am-11:00m	Exhibitor Set-up
	11:00am-5:00pm	Exhibits Open (door prizes drawn throughout day)
	10:00am-12:00pm	Contractor CEUs
	12:00pm-3:00pm	Hot Buffet Lunch
	1:30pm-3:30pm	Learn How to be a Cloud Based Electrical Contractor- simPRO
	4:30pm	Grand Prize 65" TV – Must be Present to Win

Check: Please remit your check or credit card authorization payable to **NJ-IEC** along with this signed **EXHIBITOR REGISTRATION FORM** and mail to: **NJ-IEC, 21 Commerce Drive, Suite 202, Cranford, NJ 07016** or email to dgann@nj-iec.org.

Credit Card: Please charge my Visa MasterCard AmEx

Card Number _____ Security Code _____ Exp. Date _____

Amount \$ _____ Name on Card _____

Billing Address _____ Zip Code _____

Authorized Signature _____