

CORRECTIONAL HEALTH DIVISION CONFERENCE

EXHIBITOR DATE: October 11, 2023

Arrowwood Resort Alexandria, MN

EXHIBITOR REGISTRATION FORM
COMPANY NAME:
CONTACT PERSON:
BRIEF DESCRIPTION OF PRODUCT/SERVICES:
ADDRESS:
PHONE: E-MAIL:
NAMES OF THOSE ATTENDING: (PLEASE PRINT CLEARLY) – 2 representatives included – 3 rd & 4 th are \$25
SPECIAL REQUESTS (NOT GUARANTEED): LIST YOUR PRIMARY COMPETITORS (TO BE USED FOR PLACEMENT PURPOSES):
PAYMENT INFORMATION: Make checks out to MSA
EXHIBIT FEES: 1 – 6' TABLETOP DISPLAY @ \$195.00 (Before or on Sept.30, 2023) \$
ELECTRICITY NEEDED: YES NO
SPONSORSHIP OPPORTUNITIES: Platinum \$750 Gold \$500 Silver \$250 (Platinum & Gold includes Exhibit Fees) \$
TOTAL AMOUNT ENCLOSED: \$

MSA Policy firmly restricts representatives or organizations who have not been assigned an official exhibit space from soliciting business and/or from distributing promotional materials.

RETURN FORM TO:

MINNESOTA SHERIFFS' ASSOCIATION
100 EMPIRE DRIVE, SUITE 222, ST. PAUL, MN 55103

PHONE: (651) 451-7216 FAX: (651) 451-8087