

MIAGREEN EXPO

Expiration: ___

Billing Address ___

PARTICIPATION AGREEMENT

Lyrean	Please print clearly This Box is for	your info in the Expo Guide	
EXPO & CONFERENCE	COMPANY/EXHIBITOR:		
Miami Airport Convention Center March 14 & 15, 2018	Address:	Country:	
Please complete, sign & return this Agreement to show organizers by mail@MiaGreen.com or by FAX to (305) 412-3247 All requests will be assigned on a first-come, first-served basis.	Main BRANDS: 1)	ent	
Make your check payable to MIAGREEN EXPO and mail it to			
8900 SW 107 Ave., Ste 313 Miami, FL 33176	CONTACT 1(Name): Phone: () Cellular:		
To pay by credit card use the box at the bottom.	Email: Address:	s: State: Zip:	
To pay by wire transfers ask for instructions.	City: State:		
Agreement will be considered valid when approved by Show Management	CONTACT 2:		
	DESCRIPTION	COSTS	
2) Sponsorships: sssssssssssssssssssssssssssssssssss	Choices: a) # b) # c) # Electr.: \$150 Corner booth: \$100 2 nd list.: \$495	1) Package \$ 2) Exclusive \$ 3) Booth \$ 4) Other \$	
		TOTAL \$	
	drape, one 6' draped table, 2 chairs, 1 wastebasket, ID sign, to your confirmation email for details & other potential benefits	Approved by Show Management	
of this Agreement as set forth here and in the MIAGRE	Expo Account Executive Date ibitor contracting services described above, I have read and understood the content EN EXPO & CONFERENCE Terms & Conditions, and agree to abide by them. und any signatures affixed hereto shall be considered for all purposes as originals		
PLEASE CHARGE MY CREDI	T CARD VISA MC AMEX	DISC	
Number	Cardholder		

_____ State _____ Zip____

City ___

______ Sec. Code:______ Signature _____