

March 4-5, 2009

Horseshoe Southern Indiana, 11999 Casino Center Drive SE, Elizabeth, IN 47117



Fax or Mail to

One Southern Indiana

Attn: Dawn Bennett
4100 Charlestown Road
New Albany, IN 47150
Fax: 812-948-4664

Register online at www.1si.org/mwboc

or fill out this form and fax or mail to the address above.

Exhibitor Registration

- Exhibitor fee includes continental breakfast, lunch, all or any workshop costs and conference materials for two people.
Setup will take place the afternoon of the 4th from 2 p.m. - 6 p.m.
Chamber membership is not required to be an exhibitor.
Exhibitor must register by February 18, 2009.

Cancellations/Refunds

Cancellations will not be refunded.

Hotel Accommodations

If you are interested in a room at Horseshoe for \$89, please contact them at 1-866-766-2671 and reference S03MWBO by February 25th.

Please complete the following information, so that we may better serve you.

Business Classification (at least 51% owned)

- Woman-Owned, Minority-Owned, Veteran, Other

If minority or woman-owned, are you certified?

- Yes, No, Pending with

If you are certified or pending, what certifications?

- MBE, WBE, DBE, Veteran

Who are your certifying agencies?

- INDOT, Kentucky Transportation Cabinet, IDOA, 8a, IBDC, KMBC, City of Louisville, WBENC, SBA, MSD, Other

Payment must accompany booth reservation form. Form alone will not guarantee booth space.

Company, Contact Person, Address, City, State, ZIP, Phone, E-mail

Booth Information

Booth setup is March 4th from 2 p.m. - 6 p.m. Fee includes breakfast, lunch, workshops and conference materials for two people.

- 8' x 6' Booth \$300
8' x 10' Booth \$400
2' x 6' Table Top Booth \$200

I accept the fine for early breakdown. (Booths are open 7:30 a.m. - 4:00 p.m.)

Table Top Booths are limited and for businesses under two years old or nonprofits. Your display should not be over 48" high on table tops.

Booth Workers

Four booth workers are included with registration. Additional booth workers are \$65 per person. However only two will include breakfast and lunch.

1) E-mail, 2) E-mail, 3) E-mail, 4) E-mail

Payment Information

Your request is not complete until payment is received.

Booth Price, Electricity, Additional Workers, Total \$

Enclosed is my payment in the amount of \$

Date

- Visa, Amex, MasterCard

Card #

Exp. Date, V Code#

Address of Cardholder

City, State, ZIP

Signature



Chamber & Economic Development

Phone: 812-945-0266 • 1si.org