

EXHIBIT SPACE APPLICATION

2024 HOTZONE CONFERENCE October 17-20, 2024 Wyndham Houston Stadium/Medical Center, Houston, Texas

Booth Payment by Mail, must be received by September 1st, 2024.

(Vendor will forfeit their 2024 booth space if not received by October 1st).

Please Complete This Form and Include With Check or Credit Card Information

Checks should be payable to HOTZONE, Inc.

| COMPANY INFORMATION | Officers stitution | be payable to 11012 | ONE, IIIC. | |
|--|---------------------------|--|--------------------------|--------------------------------|
| Company Name: | | | | |
| Contact Name: | | | Title: | |
| Mailing Address (no PO Box): | | | | |
| City: | | | State: | |
| Phone: | | | Fax: | |
| Contact's E-mail: | | | | |
| Website Address: http://www. | | | | |
| Primary Product or Service: | | | | |
| COMPANY REPRESENTATIVES ATTEN | | | | |
| Name: | | | Title: | |
| Name: | | | Title: | |
| Name: | | | | |
| Name: | | | Title: | |
| Name: | | | Title: | |
| Total Representatives that will be | attending Conference: = | | | |
| EXHIBITOR SPACE | | | | |
| Booths are 10' X 10' Pipe and Draped. | Each booth is furnished w | rith a skirted table, two | chairs, trash basket, an | d electricity. The Exhibit Hal |
| is fully carpeted. | | | | • |
| # Booths | X \$1,000.00 | | | \$ |
| Sponsorship Level Desired | | | | |
| CORPORATE SPONSOR | X \$5,000 (INCLUDE | ES 2 10'X 10' Booths) | = | \$ |
| Cold Coorses | V #2 000 (INCLUDE | C 1 101, 101 D 16\ | = | Φ. |
| Gold Sponsor | | ES 1 10'x 10' Booth) ES 1 10'x 10' Booth) | = | \$ \$ |
| Silver Sponsor | X \$2,000 (INCLUDE | 25 1 10 X 10 BOOth) | = | \$ |
| Bronze Sponsor | X \$1,000 = | | | \$ |
| Total Amount Due: | | | | \$ |
| METHOD OF PAYMENT | | | | |
| Payment \$ | | | | |
| □ Credit Card | | | | |
| Card Number: | | Expiration Date: | _/ Security # on B | ack of Card· |
| Name on Card | Co | mpany Name | ocounty # on 2 | don or ourd. |
| Billing Address | | mpany ramo | | |
| Phone Number () - | | | | |
| | Discover ☐ MC | ☐ Visa | | |
| ☐ Check # Chec | k Date: | | | |
| Mail To: | | | | |
| HOTZONE Conference, Attn: Chris | | | | |
| 1500 Oak Shadows Drive, Sherwood | d, AR 72120 | | | |

AUTHORIZATION

Exhibitor agrees to abide by all Rules & Regulations, Guidelines, and Terms & Conditions governing the **2024 HOTZONE Conference**. The individual's name that appears below is duly authorized to execute this binding contract on the behalf of named exhibitor.

| Authorized Name: | |
|------------------|--|
| Authorized Name. | |