

**MISSISSIPPI MUNICIPAL LEAGUE 86TH ANNUAL CONFERENCE
BOOTH SPACE CONTRACT**



Mississippi Coast Coliseum & Convention Center - Biloxi, Mississippi
July 24 - July 25, 2017

Tiffany Bush, Exhibit Manager
Fax: 601-353-6980 Cell: 601-720-4641

STATE OF MISSISSIPPI, COUNTY OF HINDS

This agreement made and entered into this the _____ day of _____, 2017, by and between the Mississippi Municipal League, Jackson, Mississippi, hereinafter called "MML" and _____ hereinafter called "Exhibitor:"

**PLEASE PRINT YOUR FIRM OR ORGANIZATION NAME IN THE BOX BELOW AS YOU WANT IT TO APPEAR ON THE SIGN.
NO LOGOS OR SLOGANS. FIRM OR ORGANIZATION NAME ONLY.**

***MML MUST HAVE NAME FOR SIGNAGE BY 7/10/17 OR EXHIBITOR IS RESPONSIBLE FOR PROVIDING OWN SIGNAGE.*
PLEASE SEND ELECTRONIC COPY OF COMPANY LOGO TO SAMANTHA@MMLONLINE.COM**

WITNESSED: That, whereas the MML is the lessee of the Mississippi Coast Coliseum, located in Biloxi, Mississippi; and whereas the above named Exhibitor desires to participate in the MML Annual Conference Trade Exposition beginning July 24 and ending July 25, 2017. Exhibitor agrees to the Rules and Regulations as agreed upon by the Exhibit Manager and the Mississippi Coast Coliseum which are hereby expressly incorporated here- in by reference and made a part of this agreement. **The MML reserves the absolute right to assign all booths and the decision of the Exhibit Manager regarding assignment, reassignment or rearrangement is final.**

EXHIBIT BOOTH INFORMATION: Please enter our order for ____ exhibit booths at \$750 (\$550 each additional booth) and \$550 each for Federal and State Agencies. **MML Associate Members will receive a 15% discount on one booth at the \$750 rate.** Booths are 10' wide and 10' deep. The following is our choice based on the official floor plan contained in this prospectus: Preferred Booth #(s) _____. Bulk space type of equipment _____. Each exhibitor is entitled to one 7" x 44" sign indicating firm name*, a drapery backdrop (8' high with 3' side dividers); 2 side chairs; one draped 6' table. Additional services or equipment such as other furnishings, electrical or plumbing services, carpentry, drayage, etc. will be extra and charged at usual rates. Upon receipt of your completed contract, your information will be provided to **Convention Display Service (CDS)**, and an exhibitor packet will be sent directly to you. If you have any questions, you may contact CDS at **601-948-4228**.

BULKSPACE INFORMATION: **PLEASE CALL TIFFANY BUSH.** Bulk space, subject to availability, will be charged at \$1.70 per square foot with a minimum of 600 square feet. Bulk Space does not include drapes, tables, or chairs. Heavy and/or large equipment placed outside of the exhibit area will be charged the bulk space charge specified above. Exhibitors using bulk space will set-up on Monday, July 24, 2017, beginning at 7:00am and must be completed by 9:00am. Heavy equipment must enter Gate 3 freight entrance only.

EXHIBIT HALL HOURS: **Monday, July 24, 2017, from 2:00pm until 6:00pm and Tuesday, July 25, 2017, from 7:00am until 2:00pm.** Exhibit booths must be staffed at all times during this period.

SET-UP AND TAKE-DOWN TIMES: Installation and set-up begins at 9:00am on Monday, July 24, 2017, and must be completed by 1:00pm. Take-down will occur on Tuesday, July 25, 2017, between 2:00pm and 4:00pm.

ALL CORRESPONDENCE REGARDING YOUR EXHIBIT BOOTH WILL BE SENT TO:

Authorized by _____ Title _____
Please Print Please Print

Signature _____ Date _____
ALL UNSIGNED CONTRACTS WILL BE RETURNED

Email _____ Cell Phone # _____

Exhibit Name _____

Type of Product or Service _____

Address _____ City _____ State _____ Zip _____

Work Phone # _____ Fax # _____ Company Website _____

PAYMENT INFORMATION:

TOTAL DUE: \$ _____ PLEASE INDICATE PREFERRED METHOD OF PAYMENT: Check Credit Card

MAKE CHECKS PAYABLE TO: Mississippi Municipal League CREDIT CARD # _____
 MAIL CHECKS TO: 600 East Amite Street EXPIRATION DATE _____
 Suite 104 CARDHOLDER NAME _____
 Jackson, MS 39201 SIGNATURE _____

OFFICE USE ONLY

Date Received _____ Space Assigned _____ Total Due _____ Acknowledgment Sent _____

Associate Member Discount _____ Accepted for the Mississippi Municipal League By _____ Date _____