

# Application to Exhibit at the 2024 MassHOPE Convention

**CONVENTION PROGRAM INFORMATION:** (PLEASE PRINT CLEARLY AS THIS IS THE INFO PUBLISHED IN THE PROGRAM.)

Exhibiting Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Business Phone / Toll Free # \_\_\_\_\_

URL (website address): \_\_\_\_\_ Federal/Massachusetts Tax ID: \_\_\_\_\_  
(will not be placed in program, for Dept of Revenue only)

**COMPANY CONTACT:** (PERSON TO CONTACT WITH ANY QUESTIONS ABOUT BOOTH, IN-HOUSE OR LOCAL REP. – WILL **NOT** APPEAR IN PROGRAM)

Name \_\_\_\_\_ EMAIL for ALL Convention Correspondence: \_\_\_\_\_

Phone \_\_\_\_\_ ext. \_\_\_\_\_ Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Refer any questions regarding convention to (check one): Company  Representative

**\*IMPORTANT\*** SORRY, I cannot attend this year, but please keep me on your mailing list \_\_\_\_\_ (Check here)  
(Return application to Susan Jacobsen, 46 South Road, Holden, MA 01520 or scan and email to [exhibithall@masshope.org](mailto:exhibithall@masshope.org).)

**BOOTH PRICES:** Please click one box below

**EXHIBIT HALL BOOTH** (8' D X 10' W booth, one 6' table, and two chairs; maximum of 4 booths allowed)

**Early Bird (thru 1/15/24):** Price per booth = \$400 TOTAL BOOTHS \_\_\_ X \$400 = TOTAL: \$ \_\_\_\_\_

**Standard (thru 3/1/24):** Price per booth = \$425 TOTAL BOOTHS \_\_\_ X \$425 = TOTAL: \$ \_\_\_\_\_

**Short Notice (after 3/1/24):** Price per booth = \$450 TOTAL BOOTHS \_\_\_ X \$450 = TOTAL: \$ \_\_\_\_\_

**LOBBY BOOTH** (8' X 8' booth, one 6' table, and two chairs - for vendors distributing literature only)

**Early Bird (thru 1/15/24):** Price per booth = \$325 TOTAL: \$ \_\_\_\_\_

**Standard (thru 3/1/24):** Price per booth = \$350 TOTAL: \$ \_\_\_\_\_

**Short Notice (after 3/1/24):** Price per booth = \$375 TOTAL: \$ \_\_\_\_\_

**NAME BADGES:** Please print representatives' names as they should appear on the Exhibitor name badge and circle age category.

- |                             |                             |
|-----------------------------|-----------------------------|
| 1. _____ (adult/teen/child) | 5. _____ (adult/teen/child) |
| 2. _____ (adult/teen/child) | 6. _____ (adult/teen/child) |
| 3. _____ (adult/teen/child) | 7. _____ (adult/teen/child) |
| 4. _____ (adult/teen/child) | 8. _____ (adult/teen/child) |

Each company will receive up to two (2) name badges per booth. You **will** be charged for extra badges.

Extra name badges for **adult** (above 18 years) \_\_\_\_\_ X \$39 = \$ \_\_\_\_\_

Extra name badges for **teen** (12-18 years) \_\_\_\_\_ X \$10 = \$ \_\_\_\_\_

Extra name badges for **child** (3-11 years) \_\_\_\_\_ X \$5 = \$ \_\_\_\_\_

TOTAL EXTRA NAME BADGES REQUESTED \_\_\_\_\_

NAME BADGE TOTAL: \$ \_\_\_\_\_

TOTAL COST: \$ \_\_\_\_\_

TOTAL ENCLOSED: \$ \_\_\_\_\_

Please see the reverse side of form =>

**INSTRUCTIONS:**

- Read [Exhibitor Guide](#) and [Rules and Regulations](#) carefully.
- The Application to Exhibit (above) is a fillable document. Please complete it and email to [exhibithall@masshope.org](mailto:exhibithall@masshope.org).
- Please have the **attending** representative read the *Exhibitor Guide* and *Rules and Regulations* before signing below. **Application will not be processed without signatures.**
- All vendors whose applications are accepted by March 1, 2024 AND are paid in full will have their websites linked from MassHOPE's website and will be included in the convention program. For those received after March 1, 2024, we will make every attempt but can make no guarantee.
- Check should be made payable to MassHOPE, Inc. for full amount.
- If interested in convention advertising, please fill out the [Convention Ad Form](#) and mail with payment to Susan at the address on the ad form. \*\*\* All advertising submissions must be received by March 4, 2024. \*\*\*

**Mail check and completed application to:** Susan Jacobsen, MassHOPE, 46 South Road, Holden, MA 01520

**OR submit application via email and follow up with a check in the mail to the above address.**

**For any questions, contact Susan: 508-335-3122 or [ExhibitHall@MassHOPE.org](mailto:ExhibitHall@MassHOPE.org).**

**By signing the *Application to Exhibit* form you are agreeing that you WILL set up on Thursday, April 18, and stay set up until the close of the convention at 5 PM, Saturday, April 20. Your booth MUST be manned during ALL hours the exhibit hall is open. Failure to comply may jeopardize your chance of being invited back in subsequent years and/or may result in a fine.**

I have read the *Vendor Information* and *Rules and Regulations*. I understand and agree to comply with MassHOPE's policy. I understand that there are no refunds after **March 21, 2024**.

Authorized signature: \_\_\_\_\_

Date: \_\_\_\_\_

Exhibitor's signature: \_\_\_\_\_

Date: \_\_\_\_\_

*If this packet has been received by a convention coordinator for a larger company, please note that we **require two (2) signatures** on the application **BEFORE** it will be accepted - one signature of the person filling out the application, and one of the attending exhibitors (representatives), only **after** each has read the *Exhibitor Guide* and its supporting documents.*

**Office Use Only:**

Total Amount Due \$ \_\_\_\_\_

Amount Paid with Application \$ \_\_\_\_\_

Application postmark date \_\_\_\_\_ Application rec'd date \_\_\_\_\_

Check Number \_\_\_\_\_ Postmark \_\_\_\_\_ Rec'd \_\_\_\_\_

**Need Rep. Signature:** N \_\_\_\_ Y \_\_\_\_ (hold)

**Outstanding Balance \$** \_\_\_\_\_

Outstanding Balance: Am't \_\_\_\_\_ Check number \_\_\_\_\_ Postmark \_\_\_\_\_ Rec'd \_\_\_\_\_

**FINAL BALANCE:** \_\_\_\_\_