

Application to Exhibit at the 2026 MassHOPE Convention

(This is a fillable form to complete and email as an attachment. If completing by hand, please print clearly.)

CONVENTION PROGRAM INFORMATION

Exhibiting Company Name _____

Mailing Address _____

City _____ State _____ Zip _____ Business Phone # _____

URL _____ Massachusetts Tax ID _____
(will not be placed in program, for Mass. Dept of Revenue use only)

COMPANY CONTACT (IN-HOUSE OR LOCAL REP. RESPONSIBLE FOR BOOTH ARRANGEMENTS - WILL **NOT** APPEAR IN PROGRAM)

Name _____ Phone _____ ext. _____

Address _____ City, State, Zip _____

Email address for ALL Convention Correspondence: _____

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

BOOTH(S)

10' D X 10' W booth, one 8' table, and two chairs; maximum of 4 booths allowed

Early Bird (thru 1/15/26): Price per booth = \$400 TOTAL BOOTHS _____ X \$400 = TOTAL: \$ _____

Standard (thru 3/1/26): Price per booth = \$425 TOTAL BOOTHS _____ X \$425 = TOTAL: \$ _____

Short Notice (after 3/1/26): Price per booth = \$450 TOTAL BOOTHS _____ X \$450 = TOTAL: \$ _____

NAME BADGES

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

Please print 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) |

Extra name badges for **adult** (above 18 years) _____ X \$59 = \$ _____

Extra name badges for **teen** (12-18 years) _____ X \$15 = \$ _____

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

TOTAL EXTRA NAME BADGES REQUESTED _____

NAME BADGE TOTAL: \$ _____

TOTAL COST: \$ _____

TOTAL ENCLOSED: \$ _____

INSTRUCTIONS

- Read [Exhibitor Guide](#) and [Rules and Regulations](#) carefully.
- The Application to Exhibit is a fillable form. Please complete, attach, and send it to exhibithall@masshope.org. If completing by hand, please print clearly and mail to address below.
- 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, 2026 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, 2026, 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 payments and submissions must be received by March 6, 2026. ***

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.

By signing the *Application to Exhibit* form you are agreeing that you WILL set up on Thursday, April 23, and stay set up until the close of the convention at 5 PM, Saturday, April 25. 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 *Exhibitor Guide* and *Rules and Regulations*. I understand and agree to comply with MassHOPE's policy. I understand that there are no refunds after **March 26, 2026**.

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

Amount Due \$ _____ Amount Paid \$ _____ Remaining Balance \$ _____

Application postmark date _____ Application rec'd date _____ Application rec'd via email ()

Payment postmark date _____ Payment rec'd date _____ Check number _____

Need Rep. Signature: N ____ Y ____ (hold)

Remaining balance p/m date _____ Rec'd date _____ Am't _____ Check number _____

FINAL BALANCE \$ _____