SUPPLIER SHOWCASE REGISTRATION -

CONTACT INFORMATION			SPONSORSHIP LEVELS		
Company Name:			□ Gold Level – \$5,000		
(As it will appear on signage)			☐ Silver Level – \$2,500	☐ I am a Gold or Silver Sponsor and will provide	
Company Address:			☐ Bronze Level – \$1,000	300 of the following item for the attendee bag giveaway:	
				Please notify the PMA Office of your sponsorship	
City:			GOLF SPONSORSHIP	interest no later than March 15, 2024.	
			Please indicate below if your o	company would like to donate any golf-related items to	
State: Zip:		be given to our John Jarvis Memorial Golf Tournament attendees.			
Main Contact:			☐ Yes, I will provide the foll	owing item(s) for golf (Qty 75):	
Title:					
Phone:					
Email:			EXHIBIT RULES		
Note: It is important to provide an email address. Updates will be communicated by email.			Table cancellation: All cancellation requests must be made in writing to the PMA office via email, mail or fax on or before March 15, 2024. Cancellations by this date will be refunded the total		
Website:				pe refunded the registration fee less a \$100 administrative charge.	
Do you require electricity at your ta	— able? □ Yes □ N	0		articipation of exhibitors will be at the sole discretion of PMA.	
Please list the products you will be exhibiting:			Only PMA Supplier members and Board of Directors) may exhibit a	d prospective Supplier members (at the discretion of the PMA at the Supplier Showcase.	
Please list the bionners you will be	exilibiting.			either PMA, its officers, directors, staff, or agents nor the	
			management of the site shall be I	liable for damage, loss, or destruction of the exhibits by reason	
Direct competitors that you do NOT	want to be placed	near:	of fire, theft, accident or other causes. Exhibitors shall rent exhibit space at their sole risk. Neither PMA, its officers, directors, staff, or agents nor the management of the site nor any of		
				nts will be accountable or liable for accidents to exhibitors, their The exhibitor shall be liable to PMA, its officers, directors, staff,	
			or agents and/or the site for any	damage done to the building and/or the furniture and fixtures our through the acts or omissions of the exhibitor, its employees,	
Please list the representatives atte	nding the Supplier	Showcase:	agents or servants. The exhibitor	agrees to indemnify, save harmless, and defend PMA, its	
			or damage to any person or prop	is against any liability, claim or expense resulting from any injury perty which occurs within the exhibitor's exhibit space or as the	
All representatives at the Supplier	Showcase must be	senarately		he exhibitor, its employees, agents or servants. PMA, its officers, iable for any lost, misdirected, mislabeled, or rejected shipments	
registered for the PMA 2024 Annual Meeting and pay registration			for materials shipped prior to Sho		
fees. One-Day Registrations are not applicable for Supplier members attending or staffing the Supplier Showcase. Registration is available			Please see complete exhibition	Please see complete exhibition rules on the PMA website.	
online at www.pmahome.org, or em	-				
·					
PAYMENT INFORMATION					
SUPPLIER SHOWCASE (CHOO	ISE ONE)				
☐ Member: \$575	SE UNL)				
· ·	na only valid if eac	h company repres	entativo registere congrately as a r	participant for the full Annual Meeting)	
	-			re representatives attending the Annual Meeting*)	
Package includes up to two	o company repres	entatives to be pre	age for companies who do not haves esent for only the Supplier Showca eting unless each representative se,	nse portion of the Annual Meeting.	
SPONSORSHIP (CHOOSE ONE					
□ GOLD : \$5,000	☐ SILVER	: \$2,500	□ BRONZE : \$1,000	Total: \$	
				·	
PLEASE REMIT THIS FORM WIT			dtsd		
Polyurethane Manufacturers Association 6737 W Washington St, Suite 4210 Milwaukee, WI 53214		Or pay by credit card			
		Name on Card	l:		
information below and return by email:		Credit Card #:		Security Code:	
iiiio@pinanome.org or lax. 414-	100-1040	Exp. Date:	Signature:		

Please make a copy for your records