



**Registration Bag Insertion Application**

As an additional service to our exhibitors, we offer the opportunity to insert promotional materials in the attendees' registration packets which are distributed onsite to all conference registrants. Non-Exhibitors will be considered for an additional fee. *NAPNAP has the right to refuse any insert request and will refund the application fee if application is not accepted. This is the total limit of any compensation request.*

**Closing date for reserving registration bag insert is February 11, 2011**

| <u>SIZE/SPECIFICATIONS</u>   | <u>EXHIBITOR PRICING</u> | <u>NON-EXHIBITOR PRICING</u> |
|--|--------------------------|------------------------------|
| Page size up to 8 1/2 "x 11"   | One Piece.....\$1,500    | 1,875                        |
| One unit piece   | Two Pieces.....\$2,000   | 2,500                        |
| 4 pages maximum  | Over-sized/Bulky.....    | Call for pricing             |
| Quantity needed: 1,450* (Note: this is a current estimate. Please check back after Feb 11 for final quantity.) |                          |                              |

Exhibitor: [ ] \$1,500 One Piece [ ] \$2,000 Two Pieces [ ] Over-sized-\$  
 Non-Exhibitor: [ ] \$1,875 One Piece [ ] \$2,500 Two Pieces

Exhibiting Company: \_\_\_\_\_  
 Contracting Company (if different): \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_



I acknowledge that NAPNAP will not be responsible for any delivery that is not labeled correctly and/or not shipped by the deadline.

**REGISTRATION BAG INSERTS**

NAPNAP 2011 Show Mgmt.  
 Materials Area: REGISTRATION  
 C/o Brede Exposition Services  
 6801 Mid-Cities Avenue  
 Beltsville, MD 20705

**PAYMENT-Submit with Application to:**  
 NAPNAP, 20 Brace Rd., Cherry Hill, NJ 08034  
 Fax: 856-857-1600

Yes, I would like the Exhibitor Bonus package: \$2,400

**TOTAL PAYMENT:** \_\_\_\_\_  
 Visa  MasterCard  AmEx  
 Acct #: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_  
 Name as it appears on credit card: \_\_\_\_\_  
 \_\_\_\_\_  
 Authorized Signature: \_\_\_\_\_  
 Check (Payable to NAPNAP) Tax ID# 23-7403934  
 Invoice (Payment due within 15 days of receipt)(Item will not be included in bag unless payment received **prior** to the conference.)

**OFFICE USE ONLY**

Ancillary Symposium:  Date rec'd: \_\_\_\_\_ Total Amount Due: \_\_\_\_\_ Date payment rec'd: \_\_\_\_\_  
 Payment Type:  ck # \_\_\_\_\_  cc authorization: \_\_\_\_\_ Deposit to Rev Acct Code: 402-02-207  
 Sample Material rec'd: \_\_\_\_\_ NAPNAP Permission Granted:  by: \_\_\_\_\_