



Mississippi Association Of Addiction Professionals

MAAP 28th Annual Conference
June 26th – 29th, 2018
Clyde Muse Center
Pearl, Mississippi

*Exhibitor and Host
Information
due by May 1, 2018

Exhibitor and Host Application

Company: _____
(Exactly how your company would like to be recognized on conference materials)

Mailing Address: _____

City, State, Zip: _____

Company Representative: _____

Title: _____

Email Address: _____

Phone: _____

Exhibitor Level: _____

Table Cloth and Skirt needed: ☐ Yes ☐ No (5' tables)

*** Any Complimentary Registrants Name Badges Should Be Completed on Attached Form.

*** Please return this form and payment to: MAAP, 4785 Old Canton Road, Jackson, MS 39211
by May 1, 2018, to ensure proper recognition in our conference material.
Please contact Rebecca Peters at 601-321-2085 if there are any questions.

*** Company Logos should be submitted to Rebecca Peters at the MAAP office by email
rebecca@msaap.net

Levels of Support

Facility Host
Investment: \$7,500

Appreciation & Band Host
Investment: \$6,000

Lunch Host
Investment: \$4,000

Literature/Materials Host
Investment: \$3,000

Speaker Host
Investment: \$2,500

Bag Host
Investment: \$2,000

Lanyard/Badge Host
Investment: \$1,500

Breakfast Host
Investment: \$1,200

Break Host
Investment: \$1,200

Premier Exhibitor
Investment: \$1,000

Standard Exhibitor
Investment: \$550

(Please Print)

Total Amount Enclosed \$ _____ Payment Type: Check/Money Order _____ Payable to "MAAP"

Amount Authorized to Charge Credit/Debit Card*: \$ _____ VISA _____ MasterCard _____ (Sorry, No AmEx)

Name as it appears on Card: _____

Billing Address: _____

Credit Card No: _____ Expiration Date: _____

Signature**: _____ Card Verification Number: _____

*You will receive a receipt for payment by Email

**By signing above you are authorizing MAAP to charge this credit card for the amount shown above. You also hereby guarantee payment of the amount shown above.

This completed form may be mailed, faxed, or emailed to the MAAP office at the addresses below:

4785 Old Canton Road – Jackson, MS 39211
info@msaap.net

Phone 601-321-2085
www.msaap.net

Fax 601-321-2086