



Phoenix Convention Center ♦ April 13-16 ♦ Phoenix, Arizona

VENDOR INFORMATION

Name		
Title		
Nation/Casino/Organization/Company		
Address		
City	State	Zip
Phone	FAX	
E-Mail	Website	

When we receive this registration form, NIGA will send you a LOGIN and PASS-WORD where you will need to enter a Product or Service Description for the Trade Show Guide (30 words or less). You may also use that access to update your information as needed.

BOOTH PRICING		
	Member	Non-Member
Single	\$2850	\$3550
2-4 (each)	\$2550	\$3200
5 or more (each)	\$2450	\$3000

BOOTH CHOICE

1st Choice _____

2nd Choice _____

3rd Choice _____

Total Number of Booths _____

SEE FLOOR PLAN AT
www.indiangaming.org

TRADE SHOW HOURS	
SET UP	
MONDAY, April 13	8AM – 8PM
TUESDAY, April 14	8AM – 8PM
TRADE SHOW	
WEDNESDAY, April 15	10AM – 4PM
THURSDAY, April 16	10AM – 2PM
TEAR DOWN	
THURSDAY, April 16	2-8PM
FRIDAY, April 17	8AM – 8PM

Questions?
Call Laura at 202-546-7711

BOOTH RATE	
x NUMBER OF BOOTHS	
= TOTAL FOR SPACE	
+ PREMIUM DUE	
=TOTAL AMOUNT DUE	
50% DEPOSIT	
BALANCE DUE	

CALCULATION FOR PREMIUM	
<i>PLEASE NOTE: There is a 10% surcharge for EACH corner booth space.</i>	
NUMBER OF CORNERS	
	x 0.1
= PREMIUM	
x TOTAL FOR SPACE	
= PREMIUM DUE	

- Two Gold-Level Registrations accompany each booth
- 10'x10' booth includes 2 chairs, 6' table & wastebasket
- Two additional Registrations can be purchased for \$50 each (LIMIT 4 PER BOOTH)
- NIGA will confirm receipt of your Exhibitor Contract. A minimum of 50% is due within 30 days of confirmation. If deposit is not received by this date, booth may revert into inventory
- Deposit is NON-REFUNDABLE
- FULL PAYMENT IS IMMEDIATELY or booth will revert into inventory
- Register booth personnel online at www.indiangaming.org beginning Feb 13, 2009

I agree to abide by the rules of the NIGA Trade Show and Convention.

Authorized Signature _____

- Attached is our check # _____ in the amount of _____ made payable to "National Indian Gaming Association"
- Please use the following credit card AMEX VISA MC

Name on Card	
Billing Address	
Card #	
Expiration Date /	V-Code
Signature	

TO RESERVE YOUR SPACE:

FAX Credit Card information with form to: 202-546-1755

MAIL registration form with payment to:

NIGA, 224 2nd Street SE, Washington DC 20003