



VENDOR REGISTRATION

Booth Name _____ **Booth #** _____

Please complete and return – information below is used to contact you, and for event marketing purposes, including the official event program.

Company _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone: _____ (listed in program and website) Fax _____

E-Mail Address _____ Web site _____

Describe what you will be selling or exhibiting in your booth detail: *(photos if available for marketing)*

10 x 10 Booth Rates:	Standard Booth Fee	\$ 600	10 x 10
	Second Booth - In-Line	\$ 500	10 x 10
	Corner Booth Fee	\$ 700	10 x 10
	End Cap (2 corner)	\$1,500	10 x 20
	* Deep End Cap (2 corners + 2 inline booths)	\$2,000	20 x 20

* Free Standing Display – Call for pricing.
(8 foot backdrop drapes provided; table, chairs and trashcan upon request)

Please reserve _____ Booth(s) at a rate of \$ _____ per individual booth.

TOTAL AMOUNT ENCLOSED: \$ _____

Please make checks payable & return to: **Galveston Island Esports Summit**
M.J. Naschke
c/o 202 Rosenberg Avenue, Suite 102
Galveston, TX 77550
Phone: (409) 762-3930 Fax: (409) 762-6467
MJ@MJNPR.com

Signed _____ **Date** _____

In reserving my booth space, I, the above signed, have also received/read the EXHIBITOR INFORMATION sheet. I understand and agree to the conditions/specifications outlined in that statement.