

Celebrating 35 Years!



Moving Business Forward

Rockin' at Ridgemont

Saturday, June 22, 2019

7:00 pm – 10:00 pm

Ridgemont Country Club

3717 West Ridge Road

Greece, NY 14626

EXHIBIT TABLE REGISTRATION & PROGRAM BOOK ADVERTISING

Program Book Advertising and Exhibit Table Reservation form and payment may be mailed to the Greece Regional Chamber of Commerce, 2402 West Ridge Road, Rochester, NY 14626, faxed to (585) 227-7275 with payment by phone at (585) 227-7272, or emailed to Sue@GreeceChamber.org. Payment may be made by check, Visa, MasterCard, Discover, or American Express. Checks should be made out to the **Greece Regional Chamber of Commerce**.

Name: _____ Company/Organization: _____

Billing Address: _____

Phone: _____ E-Mail: _____

Exhibit Table

Form & Payment must be received by June 14, 2019.

Includes one complimentary guest ticket for a representative staffing your table for the evening.

Exhibit Table Fee:

Members \$ 35 Non-Members \$60

Certificate of Insurance Liability must be provided (see reverse side for details. Exhibitor space is not guaranteed until Certificate of Insurance is received at the Greece Regional Chamber office.

Program Book Advertising

Ad must be received by June 14, 2019.

Ad Size:	Member	Non-Member
<input type="checkbox"/> Full Page (4.5" w x 7.5" h)	\$125	\$250
<input type="checkbox"/> 1/2 Page (4.5" w x 3.5" h)	\$ 75	\$150
<input type="checkbox"/> 1/3 Page (4.5" w x 2.375" h)	\$ 50	\$100
<input type="checkbox"/> Business card sized ad	\$ 25	\$ 50


Check included (Check # _____ for \$ _____)

Charge My Credit Card # _____

Circle one: Visa / MasterCard / Discover / AmEx Exp. Date: _____ Sec. Code: _____ Zip Code: _____

Note: Please complete this form and return to the Greece Regional Chamber of Commerce to ensure inclusion in signage, print and promotional material. All payments must be received prior to the event.

Signature: _____ Date: _____

<p><u>Full Page Ad</u></p> <p>4.5" wide by 7.5" high</p>	<p><u>1/2 Page Ad</u></p> <p>4.5" wide by 3.5" high</p>	<p><u>1/3 Page Ad</u></p> <p>4.5" wide by 2.375" high</p>	<p><u>Business Card Ad</u></p> <p>3.5" wide by 2" high</p> 
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EXHIBITOR INFORMATION

Exhibitor Registration Fee:

- Greece Regional Chamber Business Members or Non-Members: Exhibit table reservation includes one complimentary event ticket for a representative staffing the exhibit table for the evening.
- Payment must accompany Exhibit Table Registration form and is non-refundable.
- Space is limited and assigned on a first-come, first-served basis.
- Exhibit space is subject to availability and may be located inside or outside on the Ridgemont Country Club grounds.
- Event Sponsors will be given priority for exhibit space.
- Your Exhibit Table Registration form, payment in full, and Certificate of Insurance Liability and are to be received at the Greece Regional Chamber office prior to the event.
- **Exhibitor space is not guaranteed until Certificate of Insurance is received at the Greece Regional Chamber office.**

Participating Exhibitors to Provide:

- **A Certificate of Insurance Liability listing the following two entities as 'Additional Insureds':**
 - **Greece Regional Chamber of Commerce, 2402 West Ridge Road, Rochester, NY 14626** and
 - **Ridgemont Country Club, 3717 W. Ridge Road, Greece, NY 14626**
- Signage for your organization and all display and handout materials
- All equipment including your own tables, pop-up tent, table covering (if desired)

Greece Regional Chamber to Provide:

- Event planning and promotion
- One complimentary event ticket for a representative staffing the exhibit table

Hours of Operation:

- Set-Up: 6:30 pm
- Event Hours: 7:00 pm to 10:00 pm
- Clean-up: 10:00 pm to 10:30 pm

WAIVER AGREEMENT

I have read the information and agree to abide by the rules and regulations described. I agree to be present at my exhibit table during the entire time and to leave the exhibit table the way it was provided. I agree to hold harmless the Greece Regional Chamber of Commerce, Ridgemont Country Club, volunteers, and all persons or agents affiliated with or employed by the aforementioned organizations, on behalf of myself and my assigns and heirs from any and all claims that may result from my participation in the event. I agree to provide a Certificate of Insurance covering my participation in this event and to name the Greece Regional Chamber of Commerce and Ridgemont Country Club as additional insured parties. By signing this application, I acknowledge that this waiver agreement extends to all claims of every kind or nature, whatsoever, foreseen or unforeseen, known or unknown.

Printed Name

Signature

Date