Exhibitor Agreement and Registration Form

44th Annual Meeting of SERGG
July 15-17, 2027
Renaissance Asheville Downtown Hotel
31 Woodfin Street
Asheville, North Carolina 28801

PLEASE COMPLETE ALL FIELDS

Exhibitor/Company Information		
Company Name:		
Street Address:		
City:	State:	Zip Code:
Company Website:		
Contact Person:		Title:
Phone Number:	Email:	
Representative Onsite:		
Phone Number:	Email:	
Brief description of company products or services to be published in the program (40 words or less):		

I would like:

- ❑ Diamond Exhibit Space ($10,000) @ $_____
  Please list names for badges (**3 badges**)
- ❑ Platinum Exhibit Space ($8,000) @ $_____
  Please list names for badges (**2 badges**)
- ❑ Gold Exhibit Space ($6,000) @ $_____
  Please list names for badges (**2 badges**)
- ❑ Silver Exhibit Space ($4,000) @ $_____
  Please list name for badge (**1 badge**)
- ❑ Exhibit Space ($3,000) @ $_____
  Please list name for badge (**1 badge**)
- ❑ Non-profit Organization Space ($1,500) @ $_____
  Please list name for badge (**1 badge**)
  IRS LETTER INDICATING NON-PROFIT STATUS MUST BE SUBMITTED WITH APPLICATION FOR THIS LEVEL

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Company Representative(s) to Attend Activity (Information for badges) *Number of complimentary badges based on level of support as indicated above	
Name, Degree:	City, State:
Name, Degree:	City, State:
Name, Degree:	City, State:

ANY ADDITIONAL REPS ATTENDING MUST REGISTER AS A PROFESSIONAL VIA THE WEBSITE.

❑ I will need electrical services.
Please describe your needs: _____

Please list two companies you would prefer not to be near in the exhibit room:

1. _____ 2. _____

TOTAL AMOUNT DUE $_____

❑ Check will be mailed from company.

❑ Please have an invoice sent from PayPal to _____ at _____ so payment can be made by credit card. (Name) (Email Address)

Make check payable to SERGG, Inc. and mail to: Mary Rose Simpson
1922 Glenn Drive
Lancaster, SC 29720

REGISTRATION DEADLINE: JUNE 1, 2027

SERGG, Inc.'s Federal ID is 58-2514219

Requests for refunds must be made **in writing** and be received by Mary Rose Simpson, Secretary/Treasurer no later than **June 1, 2027.** An administration fee of $300 will be retained on all refunds. No refunds will be made if space is not used, nor will any refunds be made on space used for a portion of the exhibit period. Subletting of space is not permitted.

The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor's activities on the Rena premises and will indemnify, defend, and hold harmless the Renaissance Asheville Downtown Hotel, its owner, and its management company as well as their respective agents, servants, and employees from any and all such losses. Exhibitors agree to assume the entire responsibility and be insured for their own items of value and any type of liability incurred. Under this agreement, Exhibitors release SERGG, its agents, and the Renaissance Asheville Downtown Hotel from liabilities of any kind.

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Signature & Acceptance of Agreement

By signing below, I affirm that I have read and understood all information contained within this exhibitor agreement and the *Exhibitor Information and Guidelines*. I agree to abide by all the rules, regulations, and standards.

Print Company Representative's Name:	Signature:
Date:	

Please return form via email to: SERGGinc@gmail.com