

MISSISSIPPI ASSOCIATION OF SUPERVISORS

90TH ANNUAL CONVENTION | JUNE 10-13, 2019

MS COAST CONVENTION CENTER | BILOXI, MS



VENDOR & EXHIBITOR REGISTRATION

Registered Vendors, Sponsors and Exhibitors are welcome to attend all events on the published agenda except committee meetings, which are invitation-only. Name badges are required for all Convention activities.

2019 Exhibit Hall: Exhibit Hall will open [Tuesday, June 11, 2019](#) from 12:00 p.m. – 4:00 p.m. and [Wednesday, June 12, 2019](#) from 7:30 a.m. to 1:00 p.m. Exhibitors must check in at Registration Desk and complete booth setup by 11:00 a.m., Tuesday, June 11.

Exhibitor Door Prizes will be distributed in General Assembly (D-10/11/12) at 3:30 p.m., Wednesday, June 12. See Section 4 for more details.

Golf Tournament: Only **registered** attendees may participate in the 2019 Nick Rutter Memorial Golf Tournament on Thursday, June 13, 2019. Attendees interested in the golf tournament should complete a Golf Registration Form. Deadline to register for the Golf Tournament is May 10, 2019.

HOTEL RESERVATIONS

- Only **registered** attendees may make reservations under the MAS room blocks.
- Hotel blocks open at 9:00 a.m. on March 1, 2019. Conference rate may not be available before March 1 or after cutoff date(s).
- You must request MAS rate **at the time reservation is made** to guarantee block rates. Rates cannot be changed at check-in or check-out. Block rates are subject to sales tax and resort fees (vary by property).
- You must confirm required deposit, cancellation, early check-out and other policies with hotel.

Beau Rivage

Rate.....\$169
Cutoff Date.....May 10, 2019
Phone: 888.567.6667

South Beach Biloxi Hotel & Suites

Rate.....\$149 - \$289
Cutoff Date.....May 10, 2019
Phone: 228.206.0579..... Group code: MSAS
Online: <http://www.sbbiloxihotel.com/>

Hard Rock Hotel

Rate..... \$139-\$169
Cutoff Date.....May 5, 2019
Phone: 877.877.6256..... Group Code: MAS 2019

White House Hotel

Rate.....\$169 - \$219
Cutoff Date.....May 10, 2019
Phone: 228.271.6348..... Group Code: MAS

Margaritaville

Rate.....\$169
Cutoff DateMay 10, 2019
Phone: 228.271.6377..... Group Code: MAS

Golden Nugget

Rate.....\$119-\$139
Cutoff DateMay 18, 2019
Phone: 800.777.7568.....Group Code: S190307

Doubletree Hilton

Rate.....\$129
Cutoff DateMay 10, 2019
Phone: 800.774.1500 .Group Code: MAS Convention
Online: group.doubletree.com/MASAnnualConvention

IP Casino

Rate.....\$99.99
Cutoff DateMay 20, 2019
Phone: 888.946.2847 #1.....Group Code: S19132
Online: www.ipbiloxi.com/groups

Return completed form to:

MAS Convention
793 N. President St.
Jackson, MS 39202

Via email: sspangler@massup.org

Via Fax: 601.353.2749

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VENDOR & EXHIBITOR REGISTRATION FORM

Company Name: _____
Contact Name: _____ Title: _____
Mailing Address: _____ Suite/Floor: _____
City: _____ State: _____ Zip: _____
Phone: _____ Cell: _____ Fax: _____
Email: _____

SECTION 1: INDIVIDUAL ATTENDEE. I wish to **attend** the MAS 90th Annual Convention. My company will not exhibit or receive sponsor recognition. Non-Member Rate (**\$450**) or Affiliate Partner/Member Rate (**\$400**) per person

_____ Title _____
Print Name (as it will appear on name badge)

Stop! Skip to Sections 8 and 9 to finalize Individual Attendee Registration.

SECTION 2: PREMIER SPONSOR. All Premier Sponsorships include company's logo featured on event signage, in brochure and listing in follow-up magazine issue. Specific benefits vary by package (see options below). Additional attendees may register for \$150 per person. Premier Sponsors have the option to host a hospitality suite (**See Section 6**).

- My company will donate a Grand Prize (winner to be drawn by MAS).
- Luncheon – \$8,000 (two slots) (Includes complimentary registration for six attendees, two optional, complimentary exhibit spaces)
- Breakfast – \$7,500 (one slot) (Includes complimentary registration for six attendees, one optional, complimentary exhibit space)
- Wi-Fi Sponsor – \$3,500 (one slot) (Includes complimentary registration for four attendees, one optional, complimentary exhibit space)
- Golf Luncheon – \$2,500 (one slot) (Includes complimentary registration for three attendees)
- Golf Beverage Cart – \$1,500 (one slot) (Includes complimentary registration for two attendees)
- Break Refreshments – \$1,500 (four available) (Includes complimentary registration for two attendees)
- Registration Desk – \$1,500 (three available) (Includes complimentary registration for two attendees)
- Special Event (Contact MAS for availability and pricing)

Stop! Must complete Sections 5, 8 and 9 to finalize Premier Sponsor Registration.

SECTION 3: SPONSOR. My company wishes to **sponsor** the Convention. My company does not want to purchase exhibit space. All Sponsors will be listed in brochure and follow-up magazine issue. Additional attendees may register for \$150 per person. Sponsors have the option to host a hospitality suite (**See Section 6**).

- My company will donate a Grand Prize (winner to be drawn by MAS).
- Platinum Sponsor – \$1,000 (Includes complimentary registration for two attendees)
- Gold Sponsor – \$700 (Includes complimentary registration for one attendee)

Stop! Must complete Sections 5, 8 and 9 to finalize Sponsor Registration.

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Via Fax: 601.353.2749

SECTION 4: EXHIBITOR. My company wishes to *exhibit* at the Convention. All Exhibitors will be listed in brochure and follow-up magazine issue. Additional attendees may register for \$150 per person. Exhibitors have the option to host a hospitality suite (See Section 6).

A. **EXHIBIT BOOTHS:** Each booth package includes: one 10'w x 10'd exhibit booth, with 8' h back drapes and 3' h side dividers; one booth sign; one 6' skirted display table and two chairs. Additional furnishings and services, including electrical, must be contracted separately with **Convention Display Services (CDS)**. Once booth assignments are finalized, CDS will email an exhibitor packet with more information. You may contact CDS directly at 601.948.4228.

B. **BULK SPACE:** Subject to availability, bulk space will be charged at \$1.00 per square foot with a minimum purchase of 300 square feet (10'x30' block). Bulk space does not include booth furnishings. Indoor and outdoor bulk space is limited and will be assigned on a first-come basis. **Exhibitor must purchase at least one exhibit booth to be eligible for bulk space purchase.**

C. **EXHIBIT RATES:** First Booth: **\$750** Non-Member; **\$675** Affiliate Partner; **\$550** State Agency/Nonprofits; Additional Booth(s): **\$500** Non-Member/State Agency/Nonprofits; **\$450** Affiliate Partner; Bulk Space: **\$300** Non-Member; **\$270** Affiliate Partner

My company wishes to purchase _____ exhibit booth(s) for \$_____.

My company wishes to purchase _____ bulk space(s). Outside Inside for \$_____.

Preferred booth(s): First choice(s): _____ Second choice(s): _____ Third choice(s): _____

D. **SIGNAGE:** Please print your company name exactly as you want it to appear on the sign. No logos or slogans. If this section is left blank, company name will be printed exactly as shown above.

Company Name (as it will appear on booth sign)

E. Exhibitor must initial each of the following statements.

_____ **Booth Assignment:** MAS reserves the absolute right to assign all exhibit space, and the decision of MAS regarding assignment, reassignment or rearrangement is final. **Exhibitor acknowledges that booth selections above are not guaranteed for final assignment. Booth assignment will be solely MAS' decision.**

_____ **Attendees:** Exhibitor may register two complimentary attendees per booth purchased. Additional attendees will be charged \$150 per person. **All persons on the Exhibit Hall must be registered attendees. No one will be allowed in the Exhibit Hall without a name badge, including guests.**

_____ **Exhibit Hours; Setup and Takedown:** Exhibit Hall will be open **12:00 p.m. – 4:00 p.m., Tuesday, June 11** and **7:30 a.m. to 1:00 p.m., Wednesday, June 12, 2019.** Set-up will be 8:00 a.m. – 11:00 a.m. on Tuesday, June 11, 2019. Exhibitors must check in at Registration Desk and pick up booth packets before entering the Exhibit Hall. **Each attendee must sign in and pick up his/her own name badge.** All booths must be open and staffed during Exhibit Hours. Takedown will occur Wednesday, June 12, 2019 from 1:30 p.m. – 4:00 p.m. **Exhibitors may not dismantle booths before 1:00 p.m., Wednesday, June 12.**

_____ **Door Prizes:** Exhibitors are encouraged to give away a door prize, as this helps attract crowds to the show. Door prizes will be drawn at 3:30 p.m., Wednesday, June 12 in the General Assembly room (D-10/11/12). Exhibitors will bring prize and winning name(s) to Room D-10/11/12 at 3:00 p.m. MAS staff will assist with announcing the winners. If winner is not in attendance, Exhibitor may draw another winning name or choose to deliver the prize to the original winner. **If Exhibitor is not present at the time of drawing, MAS reserves the right to draw a new winner from MAS' ticket pool. MAS will not be responsible for delivering door prizes to winners not present at the time of drawing.**

Stop! Must complete Sections 5, 8 and 9 to finalize Exhibitor Registration.

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Via email: sspangler@massup.org

Via Fax: 601.353.2749

SECTION 5: ATTENDEE LIST (REQUIRED FOR SECTIONS 2, 3 OR 4)

List all attendees from your company. Check your Sponsor or Exhibitor package to determine number of complimentary attendees. Any additional names listed below will be billed as Additional Attendees at the rate of \$150 per person.

Name badges must be worn to access all Convention activities, including the Exhibit Hall.

_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)
_____	_____
Print Name (as it will appear on name badge)	Title (Required)

SECTION 6: HOSPITALITY SUITE REQUEST (OPTIONAL)

MAS has reserved a limited number of hospitality suites with the Beau Rivage (“Hotel”). Suites are limited and will be awarded on a first request basis. Requests **must** be approved by MAS before arrangements may be made with Hotel. Vendor will be solely responsible for making catering and other arrangements with the Hotel.

Only registered Sponsors and Exhibitors may host a hospitality suite.

NOTE: Vendor agrees not to schedule a hospitality suite or social event that competes with official Convention schedule. Therefore, no hospitality suite may be open between the hours of 7:30 a.m. and 4:30 p.m. Please indicate the requested date(s) for your suite.

- Monday, June 10, 2019: Time Open: _____ Time Closed: _____
- Tuesday, June 11, 2019: Time Open: _____ Time Closed: _____
- Wednesday, June 12, 2019: Time Open: _____ Time Closed: _____

SECTION 7 – CANCELLATION AND REFUND POLICY

Written notice of cancellation must be received at the MAS Office no later than May 1, 2019. Refund requests will be subject to a \$75 service charge. No refunds will be issued for cancellations received after May 1, 2019. No refunds will be processed until after the close of the Convention.

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SECTION 8 – PAYMENT (REQUIRED)

Please indicate payment method below. Make checks payable to Mississippi Association of Supervisors. Remit to: MAS Convention, 793 N. President St., Jackson, MS 39202.

Section 1 Subtotal: \$ _____

Section 2 Subtotal: \$ _____

Section 3 Subtotal: \$ _____

Section 4 Subtotal: \$ _____

No. of Additional Attendees _____ x \$150 each \$ _____ (Not available for Individual Attendees)

TOTAL DUE: \$ _____ Bill Me Check # _____ Visa MasterCard AmEx

Cardholder Name: _____

Card No.: _____ Exp. _____ CID: _____

Billing Address: _____

Cardholder Signature: _____

SECTION 9 – ACKNOWLEDGEMENTS AND SIGNATURE (REQUIRED)

Please read carefully and sign below.

Vendor acknowledges that it has been advised that public officials are subject to the Mississippi Ethics Law. Vendor understands that, if applicable, the Mississippi Lobbying Reform Act of 1994 may apply.

Vendor agrees to the Rules and Regulations as agreed upon by MAS and the Mississippi Coast Convention Center which are hereby expressly incorporated herein by reference and made a part of this agreement (copy provided upon request).

No distribution of pamphlets, materials or other information is allowed in lobby or meeting areas. Such materials may only be distributed in the Exhibit Hall during Exhibit Hours.

Vendor acknowledges that it has read and understands all terms and conditions in this 2019 Vendor & Exhibitor Registration Form.

Vendor acknowledges that registration is not complete and exhibit space (if applicable) will not be assigned until this 2019 Vendor & Exhibitor Registration Form is signed and full payment is received by MAS.

Signature

Date

MAS USE ONLY	
Date Rec'd: _____	
Booth(s) Assigned: _____	
Total Due: _____	
Paid: _____	

Return completed form to:

MAS Convention
 793 N. President St.
 Jackson, MS 39202

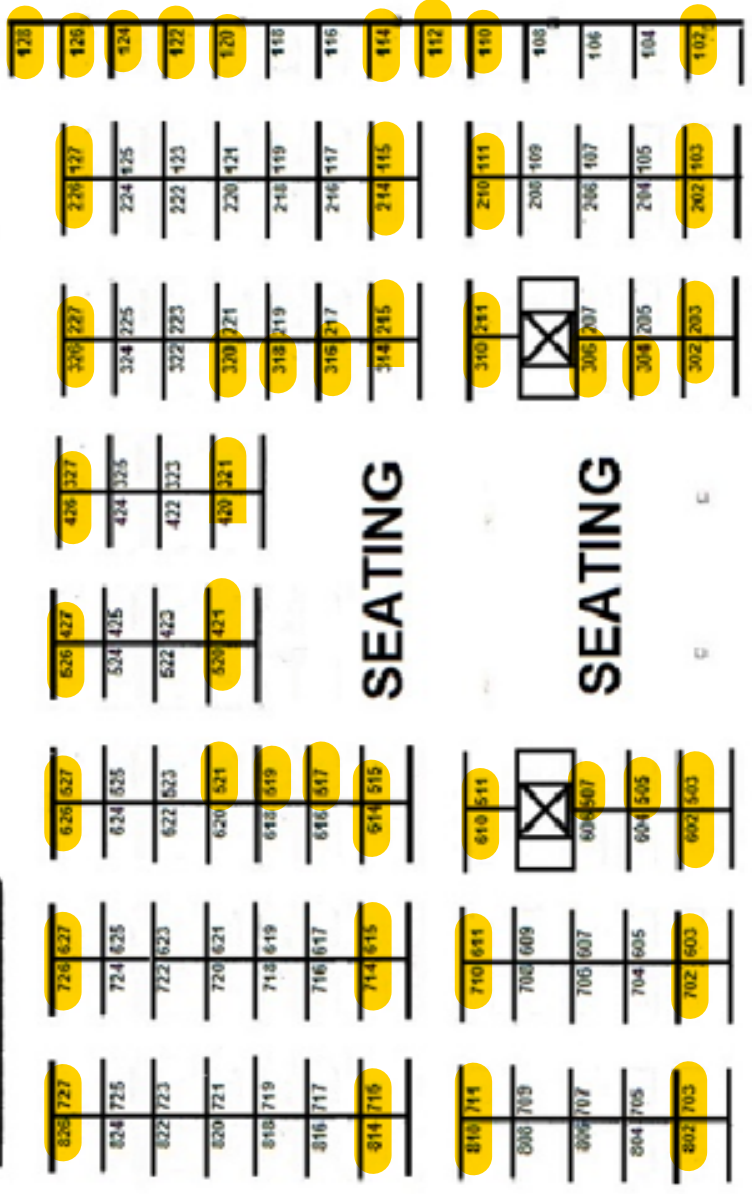
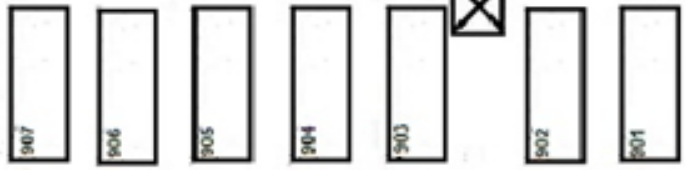
Via email: sspangler@massup.org

Via Fax: 601.353.2749

TRUCKS



MEAL AREA



TRUCKS

TRUCKS

HIGHLIGHTED booths are Priority Booth Locations.
 MAS Affiliate Partners have first option for Priority Booths.

ENTRANCE