

MISSISSIPPI ASSOCIATION OF SUPERVISORS  
 91<sup>ST</sup> ANNUAL CONVENTION | AUGUST 10-12, 2020  
 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.

**2020 Exhibit Hall:** Exhibit Hall will open [Tuesday, August 11, 2020](#) from 11:00 a.m. – 4:00 p.m. and [Wednesday, August 12, 2020](#) from 7:30 a.m. to 11:00 a.m. Exhibitors must check in at Registration Desk and complete booth setup by 11:00 a.m., Tuesday, August 11.

**Exhibitor Door Prizes** shall be given away on the exhibit hall.

**HOTEL RESERVATIONS**

- Hotel blocks open at 9:00 a.m. on May 1, 2020. Conference rate may not be available before May 1 or after cutoff date(s).
- Only **registered** attendees may make reservations under the MAS room blocks.
- 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.....\$174  
 Cutoff Date .....July 15, 2020  
 Phone: 888.567.6667  
 Online:<https://book.passkey.com/gt/217958231?gtid=6e50803273e12a9e295aa0b4321d779b>

**South Beach Biloxi Hotel & Suites**

Rate.....\$149 - \$289  
 Cutoff Date .....July 25, 2020  
 Phone: 228.206.0579..... Group code: MAS2020  
 Online: <http://www.sbbiloxihotel.com/>

**White House Hotel**

Rate.....\$159 - \$219  
 Cutoff Date .....July 17, 2020  
 Phone: 228.271.6348.....Group Code: 2008MSASSO

**Hard Rock Hotel**

Rate.....\$94  
 Cutoff Date .....July 9,2020  
 Phone: 877.877.6256.....Group Code: MAS 2020

**Margaritaville**

Rate.....\$169  
 Cutoff Date .....July 14, 2020  
 Phone: 228-271-6339 ..... Group Code: 759

**Golden Nugget**

Rate.....\$69-\$89  
 Cutoff Date .....July 19, 2020  
 Phone: 800.777.7568.....Group Code: S200332

**Doubletree Hilton**

Rate.....\$104  
 Cutoff Date .....July 19, 2020  
 Phone: 800.774.1500 ..... Group Code: MSA

**IP Casino**

Rate.....\$99.99  
 Cutoff Date .....July 17, 2020  
 Phone: 888.946.2847 #1.....Group Code: S200199

**Return completed form to:**

Yamaiky Gamez  
 793 N. President St.  
 Jackson, MS 39202

Via Email: [YGamez@massup.org](mailto:YGamez@massup.org)  
 Via Fax: 601.353.2749

## 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 91<sup>ST</sup> Annual Convention. My company will not exhibit or receive sponsor recognition.  Non-Member Rate (\$550) or  Affiliate Partner/Member Rate (\$500) per person

\_\_\_\_\_   
Print Name (as it will appear on name badge)

\_\_\_\_\_   
Title

**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 \$200 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) during educational sessions.
- Luncheon – \$8,000 (two slots) (Includes complimentary registration for five attendees, one optional, complimentary exhibit spaces)
- Breakfast – \$7,500 (one slot) (Includes complimentary registration for four attendees, one optional, complimentary exhibit space)
- Wi-Fi Sponsor – \$4,000 (one slot) (Includes complimentary registration for three attendees, one optional, complimentary exhibit space)
- Break Refreshments – \$2,500 (four available) (Includes complimentary registration for two attendees) – **Sold out**
- Registration Desk – \$2,000 (three available) (Includes complimentary registration for two attendees)
- Coffee Station - \$2,000 (two available) (includes complimentary registration for two attendees) *\*Bring your own sleeve with your company's logo*
- Registration Bags – (one available) (includes complimentary registration for two attendees) *\*Vendor will send 800 canvas bags to the MAS office no later than May 15- Sold Out*
- MAS Annual Cookout at Point Cadet (Contact Yamaiky for more information) -

**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 \$200 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) during educational sessions.
- Platinum Sponsor – \$1,400 (Includes complimentary registration for two attendees)
- Gold Sponsor – \$800 (Includes complimentary registration for one attendee)

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

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Jackson, MS 39202

Via email: [YGamez@massup.org](mailto:YGamez@massup.org)  
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 \$200 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 \$1.10 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: Non-Member - **\$800**; Affiliate Partner- **\$725**; State Agency/Nonprofits- **\$550**; Additional Booth(s): Non-Member/State Agency/Nonprofits-**\$500**; Affiliate Partner-**\$450**; Bulk Space: **\$300 minimum**

- 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. **Program AD:** Place your business card advertisement in the official Convention Program **\$100** (Artwork must be submitted to the MAS office for printing no later than May 15)

- My company wishes to purchase business card size in the MAS program (artwork must be approved by MAS)

E. **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 on Page 1.

\_\_\_\_\_  
Company Name (as it will appear on booth sign)

F. **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. Additional attendees will be charged \$200 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 **11:00 a.m. – 4:00 p.m., Tuesday, August 11, 2020** and **7:30 a.m. to 11:00 a.m., Wednesday, August 12, 2020**. Set-up will be 1:00 p.m. – 4:00 p.m. on Monday, August 10, 2020 and 8:00 a.m. – 11:00 a.m. on Tuesday, August 11, 2020. 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, August 12, 2020 from 11:00 a.m. – 4:00 p.m. **Exhibitors may not dismantle booths before 11:00 a.m., Wednesday, August 12.**
- \_\_\_\_\_ **Door Prizes:** Exhibitors are encouraged to give away a door prize, as this helps attract crowds to the show. **Stop! Must complete Sections 5, 8 and 9 to finalize Exhibitor Registration.**



**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 \$200 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)

**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, August 10, 2020: Time Open: \_\_\_\_\_ Time Closed: \_\_\_\_\_

Tuesday, August 11, 2020: Time Open: \_\_\_\_\_ Time Closed: \_\_\_\_\_

Wednesday, August 12, 2020: Time Open: \_\_\_\_\_ Time Closed: \_\_\_\_\_

**SECTION 7 – CANCELLATION AND REFUND POLICY**

Written notice of cancellation must be received at the MAS Office no later than July 1, 2020. Refund requests will be subject to a \$75 service charge. No refunds will be issued for cancellations received after July 1, 2020. No refunds will be processed until after the close of the Convention.

**COVID-19:** Regardless of cancellation policy stated above, if the 2020 COVID-19 crisis necessitates the cancellation of the 2020 Convention, MAS will refund all paid registration fees.

**Return completed form to:**

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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.

Bill Me  Check Enclosed  Credit Card (Visa/MC/Amex)

Billing Address: \_\_\_\_\_

**Section 1** Subtotal: \$ \_\_\_\_\_

**Section 2** Subtotal: \$ \_\_\_\_\_

**Section 3** Subtotal: \$ \_\_\_\_\_

**Section 4** Subtotal: \$ \_\_\_\_\_

No. of Additional Attendees \_\_\_\_\_ x \$200 each \$ \_\_\_\_\_ (Not available for Individual Attendees)

**Credit Card Payments: MAS will email an invoice with payment link to the contact listed below:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**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 2020 Vendor & Exhibitor Registration Form.

Vendor acknowledges that registration is not complete and exhibit space (if applicable) will not be assigned until this 2020 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:	_____

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