



# 2019 Associates EXPO Builder Appreciation Night

Market your products &  
services at the annual  
**Associates EXPO**

Invitation to  
GBA Builder Members &  
Exhibitors ONLY

**Thursday, November 14**  
4:00 – 7:00 pm

### Limited to 30 Exhibitors

- Each exhibit space has 6 ft. table with table cloth provided. All exhibits must be confined to this area and may not extend into the aisle or block any fire exits.
- The cost per exhibit space is \$ 450 which includes up to 3 company representatives. Due to space limitations, only 3 representatives allowed per table/exhibit space.
- All exhibitors are encouraged to provide a door prize valued at \$50+. Door prizes will be listed in event promotions to builders prior to event.
- Exhibit space reservations based on first come-first serve with payment
- Any entries received after November 8 will be \$550. Refunds will not be given after November 8.
- Set-Up Hours: 3-4 pm - Exhibitors must be set by 4 pm.
- Break-Down: 7-8 pm - Exhibit materials must be removed by 8 pm.
- NOTE: This is not a general membership event...invitation ONLY for GBA Builders & Remodelers.

**Thursday, November 14**  
**Hilton Garden Inn Airport**  
**Exhibitor Registration**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

### Exhibit Space Reservation:

\_\_\_\_ Prior to November 8 **\$ 450** \_\_\_\_ After November 8 **\$ 550**

*Exhibitor Registration provides for up to 3 company representatives*

*Due to space limitations, only 3 representatives per table/exhibit space*

Electrical needed: \_\_\_ Yes \_\_\_ No

**TOTAL PAYMENT: \$ \_\_\_\_\_ due by November 8, 2019**

*Upon receipt of registration, you will be contacted to confirm exhibit location*

**Door Prize to be provided:** \_\_\_\_\_

*Door Prize will be listed in all Builder event promotions*

**MAIL payment to:** GBA PO Box 41135 Greensboro, NC 27404

**EMAIL:** Michelle Harris [mharris@greensborobuilders.org](mailto:mharris@greensborobuilders.org) or

**FAX: 336-855-9488** with credit card information:

*(circle one) Check Enclosed Visa MasterCard AMEX*

Number: \_\_\_\_\_ Exp: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Card V Number (3 digit number on back of card): \_\_\_\_\_

Signature: \_\_\_\_\_

**Questions: Mavis Holcombe (336) 706-6942**

Email: [mholcombe@greensborobuilders.org](mailto:mholcombe@greensborobuilders.org)

**GBA office (336) 855-6255**

Administrative: Table: \_\_\_\_\_ Date Received: \_\_\_\_\_ Payment: \_\_\_\_\_