

Exhibitor Information

We provide a unique opportunity to combine both private and public associations at the 2014 Northeast Transportation Safety Conference Technical Exhibit Technical Exhibit. We invite any individual, agency, company or association interested in promoting safety, transportation services, products, education or technology to exhibit at the upcoming conference.

The Conference Executive Committee has designed the Exhibit area to give the most exposure to a few select organizations. The exhibition hall is located adjacent to conference meeting rooms, providing a highly visible and accessible exhibition area, maximizing each exhibitor's exposure to *all* conference delegates. All coffee breaks and receptions will be held within the Exhibit area to ensure maximum exposure to attendees.

We are able to offer you a choice of ten exhibit spaces. If your company or association is interested in exhibiting at the 2014 **Northeast Transportation Safety Conference**, please fill out the application form below. The application form and full payment should be sent to:

2014 Northeast Transportation Safety Conference "EXHIBITS"
RIDOT
Two Capitol Hill, Room 172
Providence, Rhode Island 02903

Applications for exhibition space will not be accepted without full payment. Upon receipt and acceptance of the application, an exhibitor's package will be sent to you. Exhibit space will be assigned on a first-come, first-served basis.

Fee per booth (only 10 available) \$500.00

Booth (10' x 6') includes pipe, drape, table, two folding chairs, one wastebasket, and one full registration for the conference. Separate packages offering accessories and electricity for your exhibit space will be mailed directly to you from the exposition service provider. For maximum benefit, **your application for exhibit space must be received on or before August 1, 2014.**



Exhibitor Fee Schedule/Registration

10 booths available @ \$500 per booth

Please Type or Print Clearly

Company/Organization: _____

Contact Person: _____

Address: _____

City _____ State/Province _____ Zip _____

Work Phone: (____) _____ Fax Number: (____) _____

