

Product Showcase

Showcase Your Company, Products & Services

Are you looking for ways to drive traffic to your exhibit space?

Do you want to reach NFMTVegas audience even when the Expo Hall is closed and conference sessions are in progress? Do you have a limited budget? Not to worry! The NFMTVegas Product Showcase can fulfill those needs!



Cost: \$749 per panel

FEATURES:

- Product Showcases are placed in high-traffic areas

 near registration and the entrance to the expo hall.
- Participating company's graphics will occupy one 42-1/2 in x 115-1/4 in panel.
- Promotional content may include: company name, exhibit space number, company logo, product description, QR code and photo of product. It's your design, be creative!
- Product Showcase will be on display the entire duration of the NFMTVegas event.

BENEFITS:

- Keeps your company's products and services in the forefront of attendee's minds even when they are outside the Expo Hall.
- Generates interest in your products/services.
- Drives traffic to your exhibit space.
- Builds awareness for your brand.

Questions?

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Exhibitor Account Executives

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Product Showcase Contract

Please reserve _____ Product Showcase panel(s) for my company. Total Cost: _____

Product Showcase Agreement/Commitment

To secure your Product Showcase panel(s) the total amount must be received by ROC Exhibitions along with this completed contract. Due to the nature of the Product Showcase and the benefits received, cancellations are not accepted. No refunds will be provided and full payment is required.

- Product Showcase subject to availability.
- Specs and submission guidelines will be confirmed after contract and payment are received.
- Artwork deadline is October 3, 2016.

Company Name:	Exhibit Space #:	
Address:	Address 2:	
City:	Zip Code:	
Contact Name:		
Tel:	Fax:	
Email:	Web Site:	
Authorized Signature:	Date:	
 (Please indicate your preferred method of payment.) Check (please make check payable to ROC Exhibitions). Please charge my credit card \$:	. Mail to ROC Exhibitions, 1963 University Lane, Lisle, IL 60532 A O MasterCard O American Express	
Credit Card #:CCV Code	e:Expiration date:	
Name of cardholder (please print):		
Credit Card Authorization Signature:		
Credit card billing address: Same as above		
Address:		
City:State:	Zip Code:	

Please send completed contract to Laura Koski - Ikoski@rocexhibitions.com or by fax 630-271-8234