



# Nebraska Agri-Business Exposition Attendee Registration

January 9-10, 2018 • CenturyLink Center • Hilton Hotel • Omaha, Nebraska



## Trade Show Registration Fees

Includes Two-Day Trade Show, Free CCA classes, Raffle Ticket and Tuesday Social

| Registrant Type   | Thru Dec. 23, 2017 | After Dec. 23, 2017 |
|---|--------------------|---------------------|
| Industry Retailer Member or Exhibitor   | \$ 25.00           | \$ 40.00            |
| Non-Member / Other <i>(Not to include industry suppliers)</i>   | \$ 30.00           | \$ 40.00            |
| Supplier Non-Exhibitor (Member or Non-Member)<br><i>Manufacturer, wholesale distributor or any type of supplier to the agri-business retail industry without an exhibit at the show</i> | \$250.00           | \$300.00            |
| Commercial Applicator License Initial or Re-certification<br><i>Includes Entrance to Trade Show &amp; Concession Stand Coupon</i>   | \$ 80.00           | \$ 90.00            |

### No Refunds for Registrations Canceled AFTER DECEMBER 23, 2017



PLEASE PRINT OR TYPE YOUR INFORMATION BELOW:

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Industry Retailer Member<br><input type="checkbox"/> Non-Member / Other<br><input type="checkbox"/> Supplier Non-Exhibitor<br><input type="checkbox"/> Exhibitor<br><input type="checkbox"/> Initial Certification<br><input type="checkbox"/> Recertification | <p>1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Name: _____</p> <p>Cell: _____ Email: _____</p> <p>2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Name: _____</p> <p>Cell: _____ Email: _____</p> <p>3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Name: _____</p> <p>Cell: _____ Email: _____</p> <p>4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Name: _____</p> <p>Cell: _____ Email: _____</p> <p>5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Name: _____</p> <p>Cell: _____ Email: _____</p> | <input type="checkbox"/> FREE CCA Classes<br>\$ _____<br><input type="checkbox"/> \$ _____<br><input type="checkbox"/> \$ _____<br><input type="checkbox"/> \$ _____<br><input type="checkbox"/> \$ _____ |
|---|---|---|

**Total Registration Fees** ..... \$ \_\_\_\_\_

### Support Your Association with Donations & Sponsorships

**Scholarship/Education Fund Donation:** \$5 \$10 \$15 \$25 \$50 Other \$ \_\_\_\_\_

**Exposition Sponsorships:** *(Any amount accepted)*  Tuesday Social  General \$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** Payable to: Nebraska Agri-Business Association, Inc ..... \$ \_\_\_\_\_

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

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

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**To Pay by Credit Card, please complete the information below:**

Please list card type \_\_\_\_\_ Card number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Email address for receipt \_\_\_\_\_

(The charge will appear on your statement as "NEBRASKA AGRIBUSINESS")

**RETURN THIS FORM AND YOUR PAYMENT TO:** Nebraska Agri-Business Association, Inc.  
 1111 Lincoln Mall, Ste 308, Lincoln, NE 68508-3910  
 Ph: (402) 476-1528, Fax: (402) 476-1259  
 Email: [rbarker@na-ba.com](mailto:rbarker@na-ba.com), Web: [www.na-ba.com](http://www.na-ba.com)

Make copies for your records  
and to register more people

**Register Online**  
@ [www.na-ba.com](http://www.na-ba.com)