Nebraska Agri-Business Expo Attendee Registration

January 26-27, 2027 ● Younes Conference Ctr N ● Kearney, Nebraska

Convention Registration Fees

Includes Awards Reception, Two-Day Trade Show, Raffle Ticket, and 2 Tuesday Social Beer Tickets

Registrant Type	Thru Jan. 14, 2027	After Jan. 14, 2027
Industry Retailer Member or Exhibitor	$ 30.00	$ 45.00
Industry Retailer Non-Member *(Suppliers Please Register as Roaming Exhibitor)*	$ 40.00	$ 45.00
Spouse of a Registrant	$ 30.00	$ 45.00
Farmer	$ 30.00	$ 45.00
Roaming Exhibitor (Member or Non-Member) *ANY Agri-business manufacturer, wholesaler, distributor or professional service provider who does not have an exhibit space in the show*	$300.00	$300.00
Crop Production Clinic (Recertification & CCA CEUs Available) *Includes Entrance to Trade Show, Raffle Ticket and 2 Beer Tickets*	$ 110.00	$110.00

Industry Retailer Member | Industry Retailer Non-Member | Roaming Exhibitor | Exhibitor | Farmer | Spouse | Crop Production Clinic

No Refunds for Registrations Canceled AFTER JANUARY 14, 2027

PLEASE PRINT OR TYPE YOUR INFORMATION BELOW:

❶ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Name:_____ $_____

Cell:_____ Email:_____

❷ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Name:_____ $_____

Cell:_____ Email:_____

❸ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Name:_____ $_____

Cell:_____ Email:_____

❹ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Name:_____ $_____

Cell:_____ Email:_____

❺ ☐ ☐ ☐ ☐ ☐ ☐ ☐ Name:_____ $_____

Cell:_____ Email:_____

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 ☐ Coffee Bar $_____

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_____ Security Code_____

Card Billing Address_____ Email address for receipt_____

(The charge will appear on your statement as "NEBRASKA AGRI-BUSINESS")

RETURN THIS FORM AND YOUR PAYMENT TO: Nebraska Agri-Business Association, Inc.
8700 Executive Woods Dr, Ste 400, Lincoln, NE 68512
Ph: (402) 476-1528 | Email: cschroeder@na-ba.com
Web: www.na-ba.com

Make copies for your records and to register more people

Register Online @ www.na-ba.com