

Form must be opened in Adobe Reader or Acrobat to send



**PARTICIPATION FORM – Americas Food and Beverage Show
(Specialty Crop Company)
MICHIGAN PAVILION TRADE SHOW AGREEMENT**

Company Name: _____ Booth: _____

Contact Person: _____

Telephone: _____ E-Mail: _____

Address: _____

City: _____ State: _____ Zip Code: _____

PARTICIPATION INFORMATION:

_____ (Company Name) agrees to participate in the Americas Food and Beverage Show, which will be held September 23-24, 2019 in Miami Beach, Florida.

Company agrees to:

1. Pay the participation fee of \$2,400 per 10x10 booth. **THERE WILL BE NO REFUNDS FOR ANY REASON.** Payment may be made by check or credit card. Once the space application is signed and returned, an invoice will be issued to the company with payment instructions. The invoice must be paid within 30 days of receipt or the space may be released or transferred to another company.
2. Provide all necessary products and product information for the show.
3. Bear all expenses and make necessary arrangements to deliver company's product samples and/or literature to the Miami Beach Convention Center by your scheduled move-in date (according to show management), which will be provided at a later date.
4. Bear all room, meal, and incidental expenses including additional services not included in the booth package while at the Americas Food and Beverage Show.
5. Complete an evaluation of the event onsite and complete and return a six-month evaluation.
6. Certifies that products displayed at the Americas Food and Beverage Show are over 50 percent grown, processed or manufactured in Michigan or that the company is headquartered in Michigan.
7. Certifies that the company uses specialty crop (fruit, vegetables) – [Full list HERE](#)

The Michigan Department of Agriculture & Rural Development agrees to:

- a. Provide a booth space that will include: pipe and drape, company signage, carpet, wastebasket, chairs, and one 6 ft table.
- b. All other cost is borne by the company (freezers/coolers, name badges, chairs, trade lead retrieval, additional tables, etc.).

Company: _____

Signature: _____

I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.

Date: _____