

## Exhibitor's Registration Information

TMCA SPRING WORKSHOP, March 11-12, 2009

Best Western Marina Grand Hotel, 300 N. Shoreline Blvd., Corpus Christi, TX 78401, (361) 883-5111

Company Name:		
Address:		
City:	State:	Zip:
Phone number:	Fax number:	
Contact:	E-mail:	
<input type="checkbox"/> <b>EXHIBITOR</b>		
_____ 1 (One) booth \$200 **Registrant (Name) _____		
_____ 2 (Two) booths \$300 **Registrants (Names) _____		
_____ More than two booths (Rate will be quoted) _____		
** Registrant will receive one (1) free membership per booth.		

### Event Sponsor

\_\_\_\_\_ Lunch (1 available) \$1000 ea. (includes 2 free memberships)

\_\_\_\_\_ Coffee Breaks (3 available) \$200 ea. (includes 1 free membership)

Sponsorship of these meals is on a first come basis.

### Contributing Sponsor

Please list my company as a contributing sponsor. Enclosed is my check  
(for contributing sponsor) in the amount of: \$ \_\_\_\_\_  
(A minimum contribution of \$100 is required).

PLEASE MAKE ALL CHECKS PAYABLE TO: **TEXAS MOSQUITO CONTROL ASSOCIATION**

#### MAIL TO:

Patrick D. Beebe ■ Orange County Mosquito Control District ■ 123 S. 6<sup>th</sup> Street ■ Orange, TX 77630

■ (409) 883-5717 ■ Fax: (409) 886-7990 ■ E-mail: [pbeebe@co.orange.tx.us](mailto:pbeebe@co.orange.tx.us)