

FLORIDA LINEMAN COMPETITION



March 1-2, 2019 • Gainesville, FL



Company _____
 Contact name _____
 Title _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Cell phone _____ Fax _____
 Contact E-mail _____
 Confirmation E-mail (if different than Contact) _____

Do you require electricity supplied to your table or tent location *(Additional hotel service fee of \$45 required)?* Yes No
Do you plan to bring a tool trailer or vehicle to competition field to display your products? Yes No

Exhibitor Registration prices

FMEA Associate Member Non-Member

<input type="checkbox"/> Welcome Reception Exhibitors ONLY <i>6ft. table and two chairs</i>	\$500	\$700
<input type="checkbox"/> Competition Field Exhibitors ONLY <i>Tent or truck-trailer space - tents, tables, chairs are not included</i>	\$500	\$700
<input type="checkbox"/> BOTH Welcome Reception & Competition Field Exhibiting <i>Tent or truck-trailer space - tents, tables, chairs are not included</i>	\$700	\$1,000
<input type="checkbox"/> I would like to rent a tent, table and two chairs	\$200	\$200
<input type="checkbox"/> I will NOT need to rent a tent or furnishings		
<input type="checkbox"/> I plan on attending the Awards Banquet	\$45/person	\$45/person

Representative #1

Full Name _____
 Nickname for badge _____
 Company _____
 Title _____
 City/State _____
 E-mail _____

Add Awards Banquet ticket (additional \$45)

Representative #2

Full Name _____
 Nickname for badge _____
 Company _____
 Title _____
 City/State _____
 E-mail _____

Add Awards Banquet ticket (additional \$45)

If you will be sending more than 2 representatives, please email their information to Garnie Holmes: gholmes@publicpower.com

Payment Information

Bill me (FMEA members only) Payment enclosed (Check payable to: Florida Municipal Electric Association)
 Please charge my: Visa MC AMEX in the amount of: \$ _____
 Card No. _____ Exp. Date _____ CVV Code _____
 Cardholder name _____
 Cardholder address _____ Cardholder City/State/Zip _____
 Cardholder Phone _____ Signature _____

For FMEA Use Only	
Received _____	Amount _____
Ack. Sent _____	Balance Due _____
Check/Visa/MC/AMEX _____	

Please return to:
Email: gholmes@publicpower.com
Mail: FMEA
 PO Box 10114
 Tallahassee, FL 32302-2114
Fax: (850) 222-0358