



27TH ANNUAL

SOLID WASTE TECHNICAL CONFERENCE



Wednesday, March 15, 2017 (Conference Day)
and Thursday, March 16, 2017 (Training Day)

Kellogg Hotel and Conference Center - East Lansing, MI



EXHIBITOR & SPONSOR REGISTRATION FORM

Company Name _____

Contact Name _____

Address _____

City, State Zip _____

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SPONSORSHIP & EXHIBITOR OPPORTUNITIES

Please check appropriate box. All sponsors will be recognized and thanked at the event and their logos will be included on any promotional material that is created after the sponsorship is confirmed. Any additional staff from the “Sponsoring Organization” can attend Conference Day at a discount rate of \$100 per person (applies to Conference Day only, offer good for up to 6 staff members).

- PLATINUM Sponsor - \$5,000**
Training Day Lunch Sponsor(s); Conference Day Lunch Sponsor(s) – includes four complimentary conference registrations, table top display area, signage and a speaking opportunity from the podium.
- GOLD Sponsor - \$2,000**
Breaks and Reception Sponsor(s) – includes three complimentary conference registrations, table top display area, signage and recognition from the podium.
- SILVER Sponsor - \$1,000**
Includes two complimentary conference registrations, table top display area, signage and recognition from the podium.
- EVENT Sponsor - \$500**
Includes one complimentary conference registration and recognition from the podium.
- EXHIBITOR - \$400**
Includes a table top exhibit, one admission for your on-site exhibit representative to the conference day sessions and the continental breakfast/lunch/reception. Up to 4 additional staff members may attend for \$100 each. Note - Upon receipt of your registration, you will receive a confirmation outlining detailed information for move-in and move-out.

Additional Registration(s):

Please include the name(s) of the individuals who will be receiving the complimentary registration(s) as noted in the chosen package. You may also include the names of additional paying staff who are registering with the "sponsoring" organization at \$100 per person (applies to conference day only).

Name

Email Address

_____	_____
_____	_____
_____	_____
_____	_____

Payment Information: AMEX Discover MasterCard Visa Cash Enclosed Check (payable to ESD)

PAYMENT INFORMATION

Total (including exhibit/sponsor fee and additional registration(s) fee): \$ _____

Card Number: _____

Name on Card: _____

Signature: _____ Expiration Date: _____ CVV: _____

Please e-mail or fax this form to Leslie Smith, CMP. Fax (248) 353-0736 or e-mail lsmith@esd.org.

Payment must be received 14 days prior to the event.

Refunds will not be provided on exhibits that are cancelled less than seven business days prior to the event.



THE ENGINEERING SOCIETY OF DETROIT®
FOUNDED IN 1895

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