BUILD & REMODEL EXPO

Presented by

MADISON AREA BUILDERS ASSOCIATION

January 25 & 26, 2025

Marriott Madison West | Middleton, WI
Saturday 9am-5pm | Sunday 10am-4pm

EXHIBITOR CONTRACT

CONTACT INFO

Company:									
Contact Name:									
Address:									
City:		State	:	Zip:					
Phone:		Emai	il:						
Business Categor	y:		W	ebsite:					
Member of: (check all that apply)	МАВ	A or MBA	NARI Ma	adison o	r Milwa	ukee	r	ion-men	nber
BOOTH INF	0	Booth reques	sts will be filled	d in the c	order co	ntracts c	are recei	ved.	
Please reserve these booth spaces:									
My Choices:	1	2	or	Sa	me Boc	oth as 202	24 Expo		
10'x10' deep (\$1,400 each) Q			ety:		\$				
10'x8' deep (\$1,200 each)				Q	ety:	0	\$		
Corner Booth Charge (+ \$150 per boo				Q	ety:	9	\$		
Non-Member Fee (+ \$500)				Q	ety:		\$		
2025 Pricing Includes ONE - 10 amp Electrical per Company & FREE WiFi Total: \$									
*After 11/1/2024 full payment is required									

EXHIBITOR AUTHORIZATION

Exhibitors are subject to ALL Terms and Conditions in the Exhibitor Contract of the BUILD & REMODEL EXPO. Please read the separate Exhibitor Contract and Marriott Madison West Expo Rules. When submitting your booth space registration, you have read and agree to all of the terms and conditions of that contract. See reverse for payment options.

Cancellation Policy: Prior to November 1, 2024, all written cancellations may receive a refund less a \$300 administrative charge. No nonmember fees will be refunded. No refunds after November 1, 2024, unless Expo is cancelled due to a pandemic as defined by the CDC and local government before event or approved by NARI and MABA board of directors prior to cancellation. If a cancellation is received after November 1, 2024, exhibitor will remain liable for the full balance of their registration contract. As an exhibitor, we also ask that you track which booth you are in and which companies you are near. You are responsible if next to a competitor. MABA and NARI reserve the right to move an exhibitor or booth as needed for flow of show.

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Sid	na	***	ro.
Sig		CU	

Date:

Return form via email to nari@narimadison.org or via mail to 5944 Seminole Centre Ct. #110 Fitchburg, WI 53711

For Office Use: Date Received:

__Contract __Deposit __QB __Excel __Map __Paid in Full

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CHECK PAYMENT								
Send check payable to:								
NARI of Madison, Inc. 5944 Seminole Centre Ct #110 Fitchburg, WI 53711								
CREDIT CARD PAYMENT								
Company:								
Name on Card:								
Card Number:		Exp:	CVV:					
Billing Address:								
City:	State:	Zip:						
Email Receipt: Yes	No Email:							
I give permission for the account to be charged as follows:								
Full Payment \$		Booth Deposit Now (50%)						
		Remaining Balance on 11/1/2	.4					
By signing this form, you authorize NARI of Madison, Inc. to charge your card for the amount(s) listed above.								
Signature: Date:								

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Registration Rules: All registration forms and deposits need to be sent to the NARI office for processing (email or postal mail). All registration forms and map selections will be processed in the order they are received at the NARI office regardless of which association you are a member of. First come, first serve. If you're first or second choice of booth space is not available, we will contact you.

Return form via email to nari@narimadison.org or via mail to 5944 Seminole Centre Ct. #110 Fitchburg, WI 53711