



25th Annual Western Indian Gaming Conference

February 11 - 13, 2020
Sycuan Casino Resort
5469 Casino Way
El Cajon, CA 92019

Exhibitor Registration Form

Please print or type legibly.

A: Organization Name, as it will appear in the show program

Company Name: _____
Street: _____ City: _____ State: _____ Zip: _____
Phone: () _____ Email: _____
Contact person: _____ Title: _____

B: Exhibit Costs per 8ft table, two chairs, and one conference pass – Show dates are February 12th &13th, 2020

<u>Associate Member Exhibitors:</u>		<u>Exhibitors:</u>	
1 Booth:	\$1,200 per booth	1 Booth:	\$1,400 per booth
Before Dec 13th	\$1,000 per booth	Before Dec 13th	\$1,200 per booth

Please reserve _____ (Qty) booths @\$ _____ = \$ _____

We WOULD LIKE to be near the following exhibitors: _____

We DO NOT wish to be near the following exhibitors: _____

***Note: The Western Indian Gaming Conference will attempt to comply with your request(s); however, in no way is guarantee implied since WIGC reserves the right to assign all space. All WIGC decisions are final.

Location preferences: (reference to floor plan numbers)

Booth Location: 1st Choice # _____ 2nd Choice # _____ 3rd Choice # _____

Associate Members and major sponsors are given first priority of booth selection. All other vendors are given second priority. **No booth assignments will be made until complete payment is received.*

C: Event Sponsorship Opportunities

We are interested in the following opportunities. Please provide further information:

_____ Advertising in WIGC Show Guide or WIGC App _____ Poker Tournament
_____ Bowling Tournament
_____ Event Sponsorship

D: Method of Payment

 Visa MasterCard AmEx

Card # _____ Exp: _____ Security Code: _____

Print name as it appears on card:

Name: _____ Signature: _____

Enclosed is payment of \$ _____, check made payable to CNIGA

E: Signature and Agreement

To ensure accuracy and efficiency, application will not be processed and booth assignment will not occur until full payment is received. I/We understand that all spaces will be allocated in accordance with the procedures in the exhibitor guidelines and that all decisions by WIGC/CNIGA are final. My signature, on behalf of myself and the organization I represent, constitutes agreement to abide by all requirements, restrictions, and obligations noted on this form and on the rules and regulations provided. Application will not be processed without signature and payment.

PRINT NAME: _____ SIGNATURE: _____ DATE: _____