



**HILLSBOROUGH COUNTY MEDICAL ASSOCIATION
 ~606 SO. BOULEVARD ~ TAMPA, FLORIDA 33606~
 TELEPHONE (813) 253-0471 ~ FAX (813) 253-3737**

APPLICATION/CONTRACT FOR EXHIBIT SPACE
TUESDAY, SEPTEMBER 12, 2017

THE WESTSHORE GRAND

(Formerly the InterContinental Hotel)
 4860 W. KENNEDY BOULEVARD
 TAMPA, FL 33609

PLEASE COMPLETE AND RETURN THIS FORM FOR THE SEPTEMBER 12, 2017, HCMA MEMBER DINNER (INCLUDES ONE MEAL). EACH ADDITIONAL MEAL IS \$50 PER PERSON. INTERNET CAPABILITY IS AVAILABLE. PARKING IS AVAILABLE IN THE URBAN CENTER ONE GARAGE.

DATE: _____

NAME OF EXHIBITOR: _____

ADDRESS: _____

PHONE: _____ CELL #: _____

CONTACT NAME: _____

CONTACT EMAIL: _____

WEBSITE ADDRESS FOR PUBLICATION: _____

DESCRIPTION OF BUSINESS TYPE: _____

ONE COVERED TABLE WILL BE PROVIDED

DESCRIPTION OF EXHIBIT: (including height & width of display). PLEASE NOTE IN ORDER TO ACCOMMODATE ALL EXHIBITORS DISPLAYS MUST NOT EXCEED WIDTH OF 6 FT TABLE.

1st time exhibitors ~ copies of any literature to be distributed must accompany this application.

WILL YOU REQUIRE AN ELECTRICAL OUTLET? _____

PLEASE PRINT NAME OF REPRESENTATIVES WHO WILL STAFF EXHIBIT TABLE:

1) _____ 2) _____

3) _____

(Limit of three representatives per exhibit table)

NUMBER OF DINNER RESERVATIONS: _____

PLEASE PRINT NAMES OF REPRESENTATIVES FOR DINNER RESERVATIONS:

1) _____ 2) _____

3) _____

***REMINDER**

AN EXHIBIT TABLE IS NOT CONSIDERED RESERVED UNLESS ACCOMPANIED WITH PAYMENT