

2017 MAPCR Spring Convention

Somerset Inn Troy, Michigan March 17-18, 2017



Space Reservation

(Note: Table rental includes all meals noted in the brochure for one person and electricity. Please let us know if you need more than the standard 120 volts.)

____Single 6" table, clothed/skirted (\$ 225)

_Additional 6' Tables (\$ 25 per table)

Additional Meals

As stated, your space reservation includes lunch for one. If you require additional meals, please add on \$35 to your TOTAL COST below.

____# of additional meals needed for Saturday

TOTAL SPACE COSTS = \$_____ TOTAL ENCLOSED: \$_____ BADGES: Please list the names of your representatives who will need a name badge:

Show Times:

Saturday, March 18, 2017 <mark>8:00 a.m. – 4:45 p.m.</mark>

Exhibitor assumes responsibility and agrees to indemnify and defend the Michigan Association of Professional Court Reporters and the Somerset Inn and their respective employees and agents against any claims or expenses arising out of the use of the exhibition premises. The exhibitor understands that neither the Michigan Association of Professional Court Reporters nor the Somerset Inn maintain insurance covering the exhibitor's property and it is the sole responsibility of the exhibitor to obtain such insurance.

Authorized Signature

Please fill out the information below and return with full payment to: MAPCR, P.O. Box 366, Pinckney, MI 48169, Tel: 734.498.2627, Fax: 734.498.8415. Checks should be made payable to MAPCR. There will be a \$50 cancellation fee.

| Name | | |
|----------------|---|------------|
| Company Name _ | | |
| Address | | |
| City | StateZIP _ | |
| Phone | Fax | Email |
| Method of | Payment | |
| Check #: | 🔤 MasterCard 🛛 Visa | |
| Card #: | | Exp. Date: |
| 3-Digit Code:_ | Card Billing Address Street and ZIP Code: | |
| Signature: | | |
| | Return Form and Payment b For special arrangements, please contact the | |