NON-VENDOR REGISTRATION FORM

(print clearly)

Your Name _____ Spouse or Guest Name _____
As you want name badge to read

Address _____ Home Phone _____

City _____ State _____ Zip _____

E-mail Address _____ Cell Phone _____

NON-VENDOR REGISTRATION

☐ Convention Registration for Non-Vendors & (1) Spouse or Guest.....$65.00 .....$ _____
Includes name badge that allows access to all events, Room-to-Room privileges, special motel rate (Tue. - Fri.), Commemorative Pin and Convention Directory.

☐ I would like to place a business card ad in the convention publication.
Enclosed is my business card and payment of:.....$25.00 .....$ _____
Half page ad .....$75.00 .....$ _____
Full page ad .....$125.00 .....$ _____

☐ Iowa Gas T-shirts (*If unable to attend, please add $8.50 per order for U.S. Shipping)* .....$20.00 ea. ..$ _____
☐ *M* ☐ *L* ☐ *XL* ☐ *XXL*

TOTAL ENCLOSED (US bank check or money order (US dollars) payable to "Iowa Gas").....$ _____

In consideration of the acceptance of my registration for this event, I for myself, my executors, administrators and assignees, do hereby release and discharge the event promoters, officials, sponsors and property owners for all claims of loss, damages, demands, actions what so ever in any manner, arising or growing out of my participation in this event. I authorize the use of my name and/or photo taken at this event for use in any media or any form of publicity and agree to abide by all show policies. If I have exhibitor spaces, I agree not to sell or display merchandise before dawn on Wednesday, and agree to make every reasonable attempt to remain open during advertised event hours.

Please make checks payable and mail to:

Iowa Gas Swap Meet
1739 E. Grand Ave.
Des Moines, IA 50316

Registration for this event acknowledges your willingness to abide by all Iowa Gas Rules. Unsigned forms will be returned for signature.

Signed _____ Date _____

Show Lodging at the Holiday Inn - 2 Night Minimum

(This information must be provided and returned with your reservation form.)

Advanced room rate $152 plus tax. Preferred vending rooms $200. Executive King $220. Suite $250. One room per registration.
**** Reservations must be guaranteed with a credit card and the room will be charged to your account if it is not cancelled 24 hours prior to date of arrival.****

Arrival Date _____ Departure Date _____ Number of nights _____ **48 Hour Notice Required for Early Departure**

Check room preferences: ☐ 1 King ☐ 2 Queens Preferred Room Number _____

Credit Card # _____ Exp. Date _____

Name as it appears on the card _____

* 200 available rooms assigned in the order received, with preference given to vendors until June 1st. *