

CANA Cremation Symposium

February 6-8, 2018 | Paris Hotel Las Vegas | Las Vegas, NV

Please read this entire document carefully and complete this application in its entirety, **INCLUDING BOTH PAGES!** If the application is incomplete, it will be returned to you for completion, which may affect table availability. Please e-mail the completed form and payment to jennifer@cremationassociation.org, mail it to CANA Headquarters, 499 Northgate Parkway, Wheeling, IL 60090 or fax it to (312) 321-4098.

Supplier Application

Company Information

Company Name		Member ID#					
Mailing Address			City	State/Province	Zip/Postal Code	Country	
Phone		Fax			Web site		
Contact Name			Title			E-mail	

Booth/Sponsorship Information

BENEFIT	Platinum \$10,000	Gold \$5,000	Silver \$2,500	Bronze \$1,000	Copper \$500	Exhibit Only		
						Premium	Standard	
Comp exhibit space	Premium	Premium	Standard	NO	NO	NO	NO	
Comp exhibitor(s) from sponsoring company	3	2	1 with Standard, 2 with Premium			2	1	
Sponsorship Selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	➔		\$
Booth Selection	Premium Exhibit included		Standard Exhibit included	<input type="checkbox"/> \$2590 Premium <input type="checkbox"/> \$ 995 Standard		<input type="checkbox"/> \$2590	<input type="checkbox"/> \$ 995	\$
Presentation	<input type="checkbox"/> Add new product presentation \$700							\$

Table Preference

We have reviewed the Exhibitor Floor Diagram (p. 5) and designate the following table choices as preferred locations:

Table # _____ 1st Choice Table # _____ 2nd Choice Table # _____ 3rd Choice

In the event all of those choices are unavailable, an effort will be made to assign the next closest table.

If possible, we would like to be adjacent to the following companies: _____

Please avoid space assignment adjacent to the following companies: _____

Attendee/Badge Information

Exhibitor(s) with booth package _____
Name(s) to appear on badge(s) _____ x \$395 Additional Exhibitors \$ _____

Additional paid exhibitors _____
Name(s) to appear on badge(s) _____

Membership Purchase/Renewal (current CANA supplier membership is required for all exhibitors) _____ x \$470
 \$ _____

Payment Information

Payment type: Check enclosed (payable to CANA) AMEX VISA MasterCard Discover • Total Balance Due \$ _____

Credit Card # _____ Exp. Date _____ CCV Number _____

Cardholder's Name _____ Cardholder's Signature _____

Exhibitor Profile

1. Please print your company name as you want it to appear in all symposium materials
2. Please provide a description of your company to be included in the on-site exhibitor listing (100 words or less).
3. Please provide a brief description of your products/services to accompany a photo of your exhibit table and representatives in *The Cremationist*, v54, i1 (25 words or less). Include a web address, contact name (if appropriate), and phone number at the end.
4. Your company will be included in our event app exhibitor listings with a link to a web address. Where should the link be directed? (Click-back tracking links okay!)

Social Media Communication

If you are active on social media, please share your profile so we can interact with you about the event.



#CANAAconnect

Facebook

Twitter

On-Site Information

5. Will you be ordering electrical? YES NO

6. Will you be contributing a prize for the passport game?

YES NO

If yes, what item will you donate and what is its value?
(bring your item to the registration desk when you check-in for exhibitor set-up)

Sponsorship Graphics

7. If you are sponsoring, please email a high resolution file of your logo in jpg, png, psd, ai, or pdf format to **Jennifer@cremationassociation.org** along with this application

8. If your sponsorship includes an ad in CANA's email newsletters, please email a jpg or png file to **Jennifer@cremationassociation.org** along with this application. Please ensure the size is no larger than 250 x 320 pixels and **specify the web address you would like the ad to link to.**

