



# 2017 WF&FSA Floral Distribution Conference

**TABLE TOPS WILL NOT BE CONSIDERED NOR ASSIGNED UNTIL PAYMENT IS RECEIVED.**

**ONCE PAYMENT IS RECEIVED YOUR TABLE TOP REQUEST WILL BE ADDED TO THE ASSIGNING QUEUE.**

PLEASE REVIEW THE FOLLOWING TEXT. BY SUBMITTING THIS FORM AND REQUESTING A TABLE TOP, YOU AGREE TO THE [WF&FSA 2017 TABLE TOP RULES AND REGULATIONS](#).

Our company agrees to display perishable or non-perishable products on one of the table tops available at the Miami Airport Convention Center, Miami, Florida, at WF&FSA's 2017 Floral Distribution Conference from October 18 – 20, 2017.

The 2017 rate for a single table top display is \$2,000 for members and \$3,000 for non-members; the rate for a double tabletop display is \$4,000 for members and \$6,000 for non-members if registration is received by August 21, 2017. After August 21, 2017 the rate for single table displays is \$2,500 for members and \$3,500 for non-members; the rate for double table top displays is \$5,000 for members and \$7,000 for non-members. This fee includes one full conference registration for the on-site table top contact. Reserve your table now so that we may include your company in conference promotion.

**\*NEW THIS YEAR\*** WF&FSA will provide a 5ft x 10ft area for single table tops or a 10ft x 10ft area for double table tops and a table tent sign with your company name. **Please note below if you would like an 8ft skirted table. If you do not request a table, your space will be empty for you to create or provide your own installation.** WF&FSA will also provide work space in the Floral Preparation and Storage Area.

- Displays can use electricity for lights, computers, etc. by completing an [electricity request form](#).
- There will be no telephone access.
- WF&FSA encourages display companies to provide business cards, flyers, brochures, etc. and interact with those on the show floor.

Displays must be completely set-up by 3:00 p.m. on Wednesday, October 18, 2017 and removed between 12:30 pm – 2:00 pm on Friday, October 20, 2017. Displays will be accessible by attendees throughout the entire conference and will be provided with overnight security. As many food functions as possible will be held concurrently with the displays.

**You must take responsibility for the design, set-up and maintenance of the display.** A company representative that is registered for the conference may be assigned the task or you may hire a local florist or floral designer to be responsible for the display. Company representatives are discouraged from staffing the table constantly, but they may want to be available during breaks between sessions and breakfasts to answer questions and network with attendees.

Those who participated in 2016 will have first right of refusal for table top space for 2017.

Tables will be assigned on a first-come, first-served basis. Please indicate the table(s) number you wish to reserve in order of preference ([see diagram here](#)):

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_ 4<sup>th</sup> Choice \_\_\_\_\_ **Would You Like A Table?  YES  NO**

REQUESTS FOR LOCATION WILL BE CONSIDERED ON A FIRST-COME, FIRST-SERVED BASIS. LOCATION REQUESTS ARE NOT GUARANTEED AND SPACE WILL BE ASSIGNED BASED ON AVAILABILITY AT TIME REQUEST AND WHEN PAYMENT IS RECEIVED.

**Sign Information – PLEASE COMPLETE YOUR COMPANY INFORMATION AS YOU WISH TO HAVE IT LISTED IN ALL MATERIALS & SIGNAGE**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Website: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Table Top Contact Person – THIS IS FOR CONTACT PURPOSES ONLY PRIOR TO THE CONFERENCE- THIS DOES NOT REGISTER YOU FOR THE CONFERENCE**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_ Cell/Mobile: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Complimentary Table Top Registration – YOU MUST PROVIDE A NAME AT THIS TIME WHICH MAY BE CHANGED AT A LATER DATE FOR AN ADDITIONAL FEE. FOR ALL ADDITIONAL COMPANY REGISTRANTS, REGISTRATION FORMS WILL BE AVAILABLE AT A LATER DATE.**

Name: \_\_\_\_\_ Title \_\_\_\_\_

E-mail: \_\_\_\_\_ Cell/Mobile: \_\_\_\_\_

**Payment (Check One):**

- MasterCard    VISA    Amex    Discover    Check Enclosed (Payable to WF&FSA) – **NOTE: TABLE TOP WILL NOT BE ASSIGNED UNTIL CHECK IS RECEIVED IN WF&FSA OFFICE**

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Signature of Cardholder: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

**For more information contact: Jessica Hauser Forte, Director of Conferences**

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