



North Carolina Coaches Clinic

Baseball • Softball • Basketball • Football
 Soccer • Wrestling • Volleyball • Tennis
 Track • Athletic Training • Golf
 Cross Country Running • Swimming

2016

Exhibitor Registration Information
July 18-20, 2016

68th Annual North Carolina Coaches Clinic
1921 W Gate City Boulevard
Greensboro NC 27403



68TH ANNUAL North Carolina Coaches Clinic ★ All-Star Week ★



2016 NORTH CAROLINA COACHES CLINIC TRADE SHOW
July 18-20, 2016

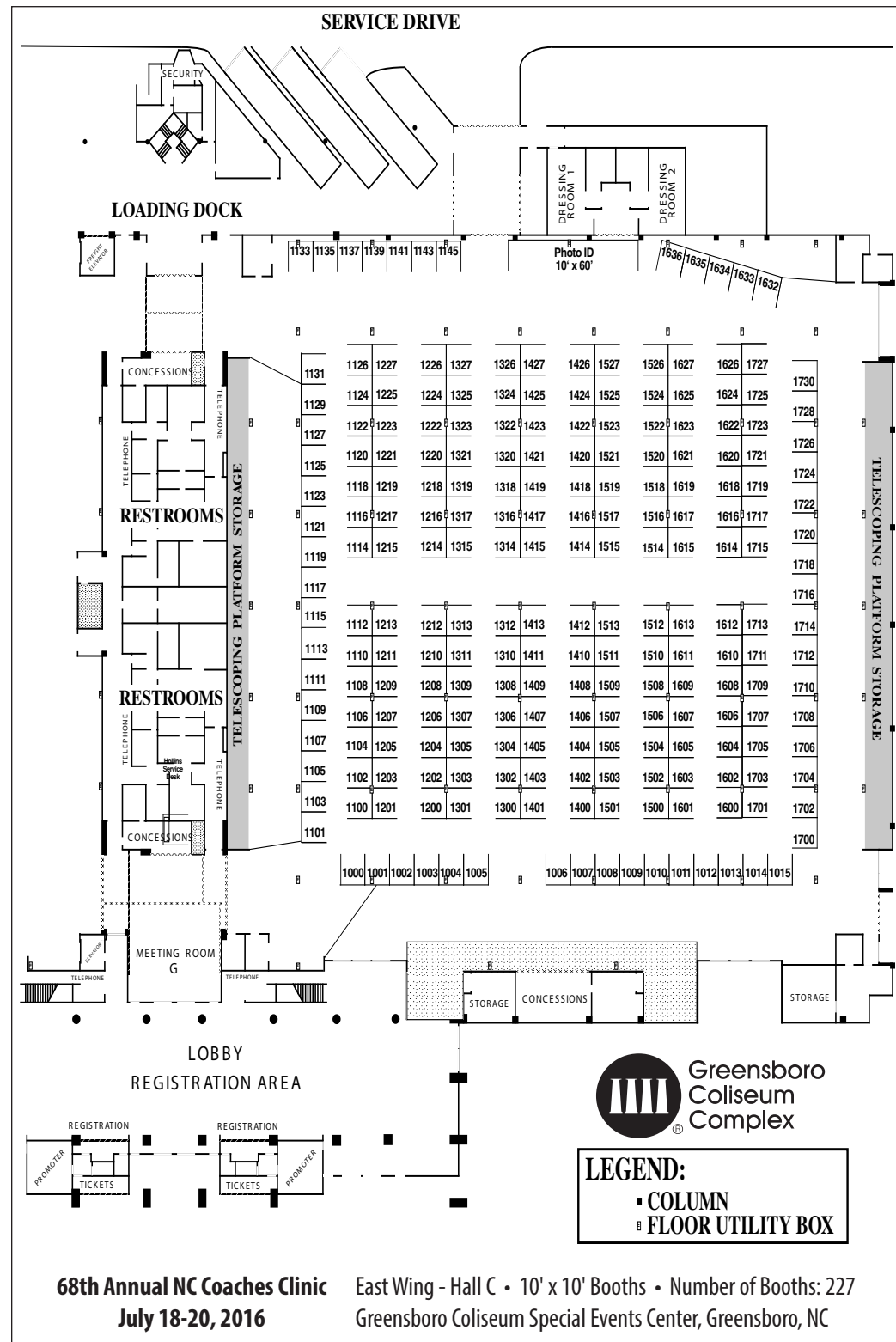


Exhibitor Information

TRADE SHOW HOURS

MOVE-IN	EXHIBITOR HOURS	MOVE-OUT
Sunday, July 17 1 - 6 pm	Mon - Wed, July 18-20 8 am - 12:30 pm Closed For Lunch: 12:30 - 2 pm Afternoon Hours: 2 - 5 pm	Wednesday, July 20 5 - 10 pm

NOTE: Doors will not open and Exhibitors may NOT move out prior to 5 pm.



RATES:

EXHIBIT SPACE FEES

- One Booth with One Packet \$495.00
- Two Booths with Two Packets 745.00
- Three Booths with Three Packets 965.00
- Four Booths with Four Packets 1,089.00
- Corners (Additional Per Corner) 100.00
- Additional Registration Packets (Each) . . 100.00
- Additional Exhibitor Badges (Each) 80.00

UTILITY FEES

- 120 Volt 20 Amps . . . \$50.00
- 208 Volt Quoted as requested
- Electrical fees increase 50% on day of show orders
- Internet \$135/show modem
- WiFi* \$10.00/day
- Telephone \$150/line show

*WiFi is available for purchase on site by opening your browser and following the instructions, access good for the device used to register.

YOUR FEE INCLUDES:

BOOTH INCLUDES

- 10' x 10' Draped Booth
- (1) 8' Table with Table Cloth & Skirt
- 2 Chairs
- Booth Sign

REGISTRATION PACKETS INCLUDE

- 2 Exhibitor Badges
- 2 Food Function Dinner Tickets
- 2 Exhibitor Reception Tickets on Monday

Decorator Services

The Coliseum has a contracted decorator, Hollins Exhibition Service, for the **North Carolina Coaches Clinic & Trade Show**. Any additional decorations, tables, table drapes, chairs, carpet and additional needs can be provided by the official decorator.

All shipping and receiving must be contracted through the decorator. **Please call 336-315-5225 to request decorator information.**

For more information on the Trade Show, please call the **NC Coaches Clinic Coordinator** at the **Greensboro Coliseum, 336-373-7400.**

Mail to: **2016 North Carolina Coaches Clinic
Greensboro Coliseum Complex
1921 W Gate City Boulevard
Greensboro, NC 27403**

Fax: 336-373-2170

North Carolina Coaches Clinic July 18-20, 2016 • Greensboro Coliseum • Special Events Center • Greensboro, NC

YES! Please reserve _____ booth(s) for the **North Carolina Coaches Clinic**

INSTRUCTIONS

- Please read this entire form
- Complete and sign the form.
- Return the form with your registration payment to:
North Carolina Coaches Clinic Trade Show
Greensboro Coliseum Complex
1921 W Gate City Boulevard, Greensboro, NC 27403
- Make check payable to:** Greensboro Coliseum Complex
Thank you!
www.greensborocoliseum.com/NCCA2016

No Booth Assignments will be made without payment in full. Reservation for space will be made in the order in which signed forms and full payment are received. Available space will be on a first-come, first-served basis.

The Greensboro Coliseum reserves the right to locate booth assignments and display areas for the benefit of the exhibitor and for the betterment of the Trade Show. Security **WILL NOT PERMIT Exhibitor Move-Out Prior to 5 pm Wednesday, July 20.** Doors will not be opened before 5 pm and early departure will affect booth assignment in the future.

PLEASE PRINT ALL INFORMATION

Company Name (as it will appear on sign) _____

Street Address _____

City _____ State _____ Zip _____

Contact Person _____ Title _____

Telephone _____ Fax _____ E-mail _____

Manufacturer Dealer Other _____

Are you interested in additional sponsorship opportunities? YES No

Payment by Credit Card: American Express # _____ Expiration Date _____

Other Card #: _____ Expiration Date _____

Signature _____

PLEASE SIGN & RETURN WITH FULL PAYMENT WITH YOUR FIRST, SECOND AND THIRD LOCATION CHOICES. (PENDING AVAILABILITY.)

Preferred Booth No(s) 1. _____ 2. _____ 3. _____

I would prefer that my booth **NOT** be set close to the following competitors: _____

Date _____ Printed Name _____

NUMBER REQUESTED	ITEM	AMOUNT
	10' x 10' Booth(s)	\$
	10' x 10' Corner Booth(s)	\$
	Additional Exhibitor Badges	\$
	Additional Registration Packets for One	\$
	Electrical (list below)	\$
	Internet/Telephone (list below)	\$
	TOTAL REGISTRATION COSTS	\$