Association of Mutual Insurance Companies

Convention Vendor Registration

Form

Name:
Name for Badge:
Company:
Address:
Phone:
E-Mail:
Additional guest(s):

Registration Fee

Vendor Registration	U	\$450	
Evening Dinner & Entertainment (Sunday evening)	.\$75 x	=	
Additional Lunch Guest (Monday-1 provided with registration)	\$40 x	_=	
Additional Breakfast Guest (Monday)	.\$40 x	=	
Additional Breakfast Guest (Tuesday)	\$40 x	= \$	
Additional Vendor Sponsorship (optional- see attached)			
Total			

Registration forms

Registration forms must be returned to Barbie Lambert by March 1, 2025. You may fax (423) 323-2247 or e-mail <u>barbielambert@easttnmutualins.com</u> the form, but payment must be received by March 1, 2025.

Mail forms and Payment to: P.O. Box 328, Blountville, TN 37617

Cancellation Policy

A full refund will be given if notice of cancellation is received on or before March 1, 2025. If cancellation is received after this date a \$50 processing fee will be deducted from refund.