

10th Annual Hall Of Fame Coaches Summit

August 27th - August 30th, 2019

EXHIBITOR APPLICATION FORM

- All Exhibit Application Forms must be accompanied by the required exhibitor fee.
- Applications cannot be held by verbal agreement nor without a completed form and/or deposit.
- Only one business may occupy a rented space; no two businesses may share the same rented space.
- All exhibitors will be allowed entry to the clinic at no charge.

Date of Application: _____

Name of Exhibitor: _____

Contact Person for Exhibit: _____

Contact Person's Direct Phone #: _____

Contact Person's email Address: _____

Exhibitor's Address: _____

City: _____ State/Province: _____ Zip Code: _____

Please mail Exhibitor Application Form and check or money order information to:

International Swim Coaches Association
2721 Brambleton Ave
Roanoke VA 24015

Alternatively, please EMAIL form and credit card information to info@swimisca.org

(Payment also accepted via Paypal to swimisca1@gmail.com.)



2019

...Exhibitor Application Form

Exhibit Space and Rental Fees

Booth Size (8 x 10), Skirted Tables & Chairs included in the price

Single Booth Space \$1,000.00 Double Booth Space \$1,500.00

Set Up: August 27th: 10:00am - 5:00pm

Exhibit / Clinic Hours:

- August 27th: 6:00pm - 9:00 pm (Exhibit only)
- August 28th: 8:00am - 5:00 pm
- August 29th: 8:00am - 5:00 pm
- August 30th: 8:00am - 5:00 pm

Payment:

Mastercard Visa Discover Card # _____

Expires _____ CVV Code _____

Billing Address Zip Code _____

Check # _____ Enclosed

Questions? Please contact the ISCA Main
Office at info@swimisca.org
Or

(540) 904-2666

