New York State School Counselor Association Conference (NYSSCA) Hilton Albany • November 21-23, 2024 EXHIBITOR APPLICATION (PLEASE PRINT)

Application for exhibit space at the 2024 NYSSCA Conference indicates the applicant's willingness to abide by exhibit terms and general regulations, as Management deems necessary to the success of the exhibition, as long as this does not materially alter the exhibitor's contractual rights. Reference the enclosed Conference Exhibitor Agreement. This application will become a contract when a confirming return email is sent by an NYSSCA authorized representative. Full payment should accompany this application. Federal and state agencies may defer payment if a purchase order is submitted with the application.

Space Requested: Exhibit space will consist of a 6' x 30" skirted table and two chairs. Exhibitors requiring electrical, computer hook-up and phone outlets must make their own arrangements with Hilton Albany. Further information concerning this and shipping information will be sent via			Number of tables purchased		
email with the exhibitor confirmation.	11 3				
		Table :	#1 Name of Primary Representative		
Organization Name (as it is to appear in the program)		Phone	Email	TABI	
Website		Table #	1 Name of Additional Representative (add \$275)	=	
vebsite					
Street Address		_	#2 Name of Primary Representative	E #2	
City	State Zip	Phone	Email	TABI	
Contact Name for Exhibiting Correspondance		Table #	2 Name of Additional Representative (add \$275)	-	
Phone		Table :	#3 Name of Primary Representative		
 Email		Phone	Email	TABLE	
I would like to donate an item for the Door Prize. Iter	m:		3 Name of Additional Representative (add \$275)		
EXHIBITOR TABLE LOCATIONS:					
(Required. See Floor Plan.) 1st Choice	2nd Choice		3rd Choice		

Save \$50 if you register by August 15, 2024

First Table \$500 Additional Tables \$400 each

Payment due by October 21, 2024

	Quantity	Amount
First Exhibitor Table	1	\$500
Additional Tables (\$400 each)		
One Additional Representative Per Table (\$275 each)		
Less the Early Bird Discount (Good through August 15, 2024) -\$50		
T	OTAL DUE:	

METHOD OF PAYMENT ☐ CHECK Please make check payable to NCYI, and mail it, along with this completed application to: NCYI, P.O. Box 22185, Chattanooga, TN 37422-2185 ☐ CREDIT CARD □Visa ■ MasterCard Discover ☐ American Express Card # Name on Card _____ Billing ZIP______ Expiration _____ 3-Digit Sec. Code ___ If you pay by credit card, you may either mail (see address above), fax, or scan/email your completed application to: FAX: 423.899.4547 / Scan/Email: exhibitors@ncyi.org

REFUND POLICY: See Section 12 on the "Conference Exhibitor Agreement"

HOTEL RESERVATION INFORMATION:

The NYSSCA Conference will be headquartered at the Hilton, Albany. To make your reservations, visit the conference webpage at www.ncyionline.org/nysscac.