



CONTACT INFORMATION

Business Name: _____ Contact Person: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email: _____
Web address for Business Showcase Online: _____

BOOTH LOCATION

Please list several alternate choices. Booths will be assigned on a first payment received basis. We make every effort to assign the locations you specify, however we cannot guarantee you will receive the booth(s) of your choice. Refer to the exhibit floor plan to specify your location preference. Also, check out our website to view which businesses have already signed up, and where their booths are located at www.peoriachamber.org/business_showcase.

Choice One: _____ Total Number of Booths Needed: _____
Choice Two: _____ Amount Enclosed \$ _____
Choice Three: _____ Do you require extra electrical capacity? Yes No
Choice Four: _____ Products or Services to be exhibited? _____

METHOD OF PAYMENT

Please indicate the Package and Option that you prefer.

___ Package A* ___ Package B* ___ Package C* ___ Package D*
 ___ Option 1 \$750 ___ Option 1 \$700 ___ Option 1 \$650 ___ Option 1 \$625
 ___ Option 2 \$1,100 ___ Option 2 \$1,000 ___ Option 2 \$900 ___ Option 2 \$850

(*\$200 addition to all packages for Non-Chamber members)

___ A Check is enclosed payable to: Peoria Area Chamber of Commerce
___ Credit Card Payment: ___ Visa ___ Mastercard ___ American Express
Card # _____
Exp Date: _____
Signature: _____

**Booth Reservations Requested By:
February 9th, 2007**

As a Business Showcase Exhibitor you will be part of the Business Showcase Online! This free online trade show is held December through March in conjunction with the trade show at the Peoria Civic Center. Fill out your website address on the exhibitor registration form and receive a free link to your home page!
www.peoriachamber.org/businessshowcase



Mail your payment and registration form today to:
Peoria Area Chamber of Commerce
c/o Sarah Stabler
124 SW Adams, Suite 300
Peoria, IL 61602
OR
Fax information to: (309) 495-5978

Note: Payment must accompany this form. Exhibitor space will be assigned once the full amount has been paid. No phone reservations will be accepted.

For Office Use Only
◇ Entered: _____
◇ Amount Paid: _____
◇ Package/Option: _____
◇ Booth #: _____