

Building Enclosure Symposium



International Institute of Building Enclosure Consultants
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Exhibitor Contract

2019

November 11-12, 2019 • Louisville Marriott Downtown • Louisville, Kentucky

Attendee demographics

This two-day educational program is attended by architects, engineers, contractors, facility managers, and other professionals who specialize in roofing, waterproofing, and exterior wall technologies. Exhibits and sponsorships from leading manufacturers provide attendees with access to the newest technologies and services.

A forum for open interaction

The approximate duration of the symposium is from 8:00 AM to 5:00 PM for two consecutive days. Each vendor is provided with a six-foot table, and a chair. Exhibitors have scheduled opportunities to meet with attendees during lunches, breaks, and before and after each day's scheduled events. In this open and inclusive environment, attendees and exhibitors are encouraged to interact informally throughout the duration of the symposium. Anticipated attendance is over 300 (based on recent years' registrations).

Exhibitor Benefits

- Two registrations (educational program access included)
- 8'x10' display area, six-foot draped table, chair, wastebasket, carpet, and side and back rails/drapes
- Listing and link from IIBEC website (~20,000 visitors /month)

Administrative Contact Information

Company name:	
Contact name:	
Address:	
City/state/zip:	
Phone:	Website:
E-mail:	

Attending Representative(s) Information

Representative #1 (included with exhibitor fee)

Company name:	
Contact name:	
Address:	
City/state/zip:	
Phone:	IIBEC member #:
E-mail:	

Authorized Signature of Agreement

Signature	Member No.	Date

* IIBEC members are individuals rather than corporations. To qualify for the member rate, this contract must be associated with a current IIBEC member employed by the exhibiting company. Indicate your company's IIBEC member below:

Associated Member Name: _____

Member No. _____

IIBEC member* - \$1,750 Nonmember - \$2,050

Payment Method U.S. funds only.

- Invoice Visa MasterCard
 Check Discover American Exp.

Representative #2 (included with exhibitor fee)

Company name:	
Contact name:	
Address:	
City/state/zip:	
Phone:	IIBEC member #:
E-mail:	

Card Number:	
Name on card:	
Verification Code:	Exp. date:
Signature:	