

## EXHIBITOR REGISTRATION

ITS-NY MEMBER: \$690  
PER EXHIBIT BOOTH

NON-MEMBER: \$990  
PER EXHIBIT BOOTH

Exhibitor Registration Fee includes one free conference registration, exhibit booth, booth draping, table, chairs, waste basket, booth sign with your organization's name and basic power. Wireless internet connection available free of charge. Download Floorplan on registration page for booth selections.

*To be included on Annual Meeting Signage, please return this completed form by June 4, 2025.*

**NOTE:** If you wish to register additional person(s) to accompany you in your Exhibit Booth, **YOU MUST REGISTER THOSE PERSONS AT THE APPLICABLE MEMBER OR NON-MEMBER RATE** using the Annual Meeting Attendee Registration Form.

*After May 21st and at-door, registration fees increase by \$75 per registrant, with space subject to availability. **NO REFUNDS** will be issued after May 21, 2025.*

ITS-NY is a non-profit, non-lobbying 501(c)3 organization with FEIN: 13-376929

**Reminder:** Please call the hotel reservations lines directly at (866) 746-1077 toll-free and be sure to note our ITS-NY Group Code **KGK61025ITSNY**. Room block will be released on May 11, 2025.



## ITS-NY ANNUAL MEETING

### EXHIBIT SPACE REGISTRATION FORM

EXHIBITOR ORGANIZATION NAME: \_\_\_\_\_

Contact Name and Telephone Number: \_\_\_\_\_

**Note: Your organization will be listed on the 2025 ITS-NY Annual Meeting Materials just as you have it shown it above.**

☐ YES, MY ORGANIZATION WILL BE AN EXHIBITOR.

My preferred booth location is Booth # \_\_\_\_\_

(Download Exhibit Hall Floorplan on [event site](#))

**Please complete the information below for the person using the Free Conference Registration included with the Exhibit Booth Fee (to register additional attendees, please use the General Attendee Registration Form.**

Exhibitor Registrant Name: \_\_\_\_\_

Nickname for Badge: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

\_\_\_\_\_ Enclosed is my Exhibit Booth Registration Fee of \_\_\_\_\_

**If paying by check, please return this completed form, along with your payment, to:**

ITS-NY  
c/o Tierra Fisher, ITS-NY Administrator  
442 5<sup>th</sup> Avenue, #1863  
New York, NY 10018

**THANK YOU!**

**\*\*\*POSTMARK DEADLINE JUNE 4, 2025\*\*\***

A Confirmation Email will be sent to you upon receipt of your form and payment/check.