

Working Dealer Credential Order Form

DUE DATE: January 7, 2012

Please complete/submit this form to order your Working Dealer Badges

Progressive Insurance Strictly Sail Chicago Registration

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January 26-29, 2012

www.strictlysailchicago.com

Working Dealer: _____ Submitted By: _____
(If above person should receive a badge, enter name below)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Manufacturer: _____ Space #: _____

(Please list the exhibiting company you will be representing at the show. If you work for multiple manufacturers, please complete a form for each)

EMPLOYEE INFORMATION -- Enter first and last name. One name per line. No initials please.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____ 200 sq. ft. or less
8. _____
9. _____
10. _____
11. _____ 201-500 sq. ft.
12. _____
13. _____ 501-2000 sq. ft.
14. _____
15. _____
16. _____ 2001-3500 sq. ft.
17. _____
18. _____
19. _____
20. _____ 3501 sq. ft. or more

Credential Allocation Chart:

Your company is allotted show credentials according to total exhibit area occupied.

Booth/Bulk Exhibits

200 sq. ft or less = 6 Badges

201 – 500 sq. ft = 10 Badges

501 - 2000 sq. ft = 12 Badges

2001 – 3500 sq. ft = 15 Badges

3501 sq. ft or more = 20 Badges

Replacement/Additional Badges:

There is a \$10 per badge charge for additional badges over the limit or replacement badges. Credit card information required.

To Pay By Check ☐

NMMA (Payment Center)
33928 Treasury Center
Chicago, IL 60694
(Contact NMMA for Overnight Delivery Info)

To Pay By Credit Card ☐

*NMMA has adopted an online system to process all credit card transactions. NMMA will create your order as requested and contact you via e-mail or fax with the required credit card payment instructions.

☐ **Hold Credentials at Registration**
or
☐ **Mail Credentials to the attention of:**

***Badges will not be issued until space is paid in full**

Management's Use Only Date Received: _____ Date Entered: _____ Date Mailed: _____

Auth# _____ Order # _____ Processed By _____