



# WASHINGTON FARM BUREAU

## 98<sup>th</sup> Annual Meeting & Trade Show

We'll have over 250 Ag Leaders at the annual meeting this year.

This is your opportunity to participate in the WFB Trade Show and meet the farmers and ranchers who are influential grass roots leaders in the Washington agricultural community and important to your organization.

Booth space is reserved on a first come first serve basis.

**Space is limited so reserve your Booth ASAP!**

<b><u>When:</u></b>	Trade Show: November 13 <sup>th</sup> & 14 <sup>th</sup> 2018 Set Up: Monday November 12 <sup>th</sup> between 1:00 PM & 5:00PM Tuesday November 13 <sup>th</sup> between 7:00 AM & 9:00 AM Tear Down: No Earlier than 4:00 PM on November 15 <sup>th</sup> All displays must be removed before 12:00 PM November 16 <sup>th</sup>
<b><u>Where:</u></b>	Yakima Convention Center
<b><u>Cost:</u></b>	\$300 for an 8' x 8' booth space (includes meals for one person)
<b><u>Meals:</u></b>	2nd person and each additional person at the booth - \$100 (1 breakfast, 2 lunches, 2 dinners)

To participate please fill out the attached form and return it via:

Email: [dpearson@wsfb.com](mailto:dpearson@wsfb.com)  
Mail: 975 Carpenter Road, Suite 301  
Lacey, WA 98516

Make Checks Payable to: **Washington Farm Bureau or WFB**

**Ship Booths To:** Washington Farm Bureau Meeting & Trade Show  
**Attention:** **Your Name**  
Yakima Convention Center  
10 North 8th St  
Yakima, WA 98901-2515

**Drayage is not included in the cost of booth space.**

### **Payment Confirms Your Reservation**

Trade show booth reservation form on the following page.

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## WFB 98th Annual Meeting & Trade Show Booth Reservation Form

November 13<sup>th</sup> & 14<sup>th</sup>, 2018

Yakima Convention Center, 10 North 8th St, Yakima, WA 98901-2515

Name of Company or Organization		
Type of Business or Organization		
Address	City	State, ZIP
Billing Contact Person	Phone	Email
Booth Rate (\$300 per 8'x8' Space)	\$300 X _____ =	\$
Friends Booth Support (\$100 per 8'x8' Space)	\$100 X _____ =	\$
Participant 1 Name	Email Phone	No Cost
Participant 2 Name <b>(Add \$100)</b>	Email Phone	\$
Participant 3 Name <b>(Add \$100)</b>	Email Phone	\$
Participant 4 Name <b>(Add \$100)</b>	Email Phone	\$
Participant 5 Name <b>(Add \$100)</b>	Email Phone	\$
<b>Total Due</b> <i>Make Checks Payable to:</i>	Washington Farm Bureau	\$
Card Number: VISA   MasterCard   AMEX	_____	
Name On Card	Expiration Date	SIC Code
Signature:	Date:	