## ZU NATURAL REFRIGERATION CONFERENCE & HEAVY EQUIPMENT EXPO

## MARCH 15-18, 2020 • ROSEN SHINGLE CREEK • ORLANDO, FLORIDA

By signing this application, the exhibitor agrees to abide by all of the provisions of the Exhibitor Rules & Regulations, made available online at www.iiar.org 2020 Exhibitor Information, governing the 2020 IIAR Natural Refrigeration Conference & Heavy Equipment Expo, the exhibitor agrees to give permission to the organizers of the 2020 IIAR Natural Refrigeration Conference & Heavy Equipment Expo to photograph, videotape, and duplicate any materials used for or at the meeting in Orlando, Florida.

## ALL FEES ARE PAYABLE IN U.S. DOLLARS.

Method of Payment (Check one): Check (A 3% credit card processing fee will be added to be		Amount of Payment:					
Name (please print):	Card Number:						
Expiration Date: Security Co	de:						
Signature:	Date:						
Send this form with payment (USD only) via c If paying by credit card, you may fax this forr	<b>o</b>						

**Cancellation Policy** • IIAR will refund the deposit, less an administrative fee of \$375, for cancellations received in writing before November 15, 2019. A refund of 50% of the exhibitor's payment will be made for cancellations received in writing after November 15, 2019 and before December 20, 2019. No refunds will be issued after December 20, 2019.

Exhibitors receive two complimentary registrations with each 10' x 10' booth purchased. Please indicate the name of each person who will receive the complimentary registrations at the 2020 IIAR Natural Refrigeration Conference & Heavy Equipment Expo in Orlando, Florida on March 15–18, 2020.

	Last Name	First Name	Email Address	First Name (as it should appear on badge)	
1					
2					
3					
4					
5					
6					
7					
8					

Please provide a description of the products/services your company will exhibit during the 2020 IIAR Natural Refrigeration Conference & Heavy Equipment Expo for publication online and in the *Condenser* (30 Words or less)

If purchasing a Product/Service Showcase, please submit a title (10 Words or less) and description (75 Words or less)

IIAR Use:					
Accepted IIAR by: Deposit: \$ Balance Due: \$	Date: Check #: Check #:	Booth(s) assigned: Date: Date:	Product description enclosed Batch#: Batch#:	□ Yes 	□ No