## 2017 Southwest Forest Products Expo

The 2017 Southwest Forest Products Expo will be held August 25-26, 2017 in the 85,000 square foot Summit Arena and Exhibit Halls B, C, & D of the Hot Springs Convention Center in Hot Springs, Arkansas. Exhibitors will be given the opportunity Wednesday and Thursday, August 23-24 to set up their equipment and exhibitor booth displays. An Appreciation Reception honoring Expo Exhibitors will be held at the co-located Embassy Suites on Thursday evening, August 24, beginning at 6:00 p.m. The Expo will officially open at 12:00 Noon, Friday, August 25. On Friday, a Welcome Reception for ATPA members, exhibitors and others will be held at 5:00 p.m. followed by an auction at 6:30 p.m. to benefit the ATPA scholarship fund. The Expo will officially close at 7:00 p.m. The Expo will open again at 8:00 a.m. on Saturday, August 26 and close at 3:00 p.m. Exhibitors will be able to break down their displays after 3:00 p.m. on Saturday.

Reserve your exhibit space now by mailing the attached reservation form with your payment to the Arkansas Timber Producers Association (ATPA) or fax your reservation request to the ATPA office at (501)224- 9625 with payment by mail. You may also submit payment by credit card. Reservations will be made on a first come-first serve basis. Take advantage of Early Bird Registration and get a 10% discount on exhibit space cost. Early Bird Registration cutoff date is April 15, 2017. Exhibitors can also get a 10% discount on the cost of an additional exhibit space.

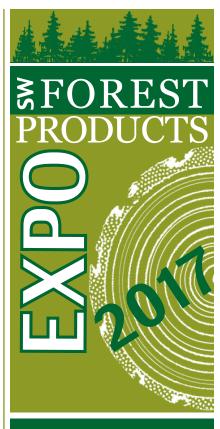
In order to reserve an equipment exhibit space, a 50% deposit check must accompany the space reservation request or this deposit payment can be made by credit card. The balance of the space cost is due no later than June 24, 2017. If a reserved exhibit space is cancelled, the deposit amount less a 10% forfeiture fee will be refunded.

If a 10'x10' exhibit space is requested, full payment is due at the time of the reservation request in order to guarantee the 10' x10' exhibit space.

Exhibitors displaying equipment and/or setting up booth displays must maintain general or public liability insurance with a minimum \$2 million aggregate, and \$1 million per occurrence; auto liability in the amount of \$1 million CSL, and statutory workers' compensation insurance. Each exhibitor shall list the ATPA as an "Additional Insured" for general liability and auto liability and furnish proof of such to the ATPA no later than July 15, 2017.

Exhibitors will receive an Exhibitor Manual containing Expo guidelines, instructions and other information approximately 60 days prior to the Expo opening date.

We hope to see you at the 2017 Southwest Forest Products Expo.

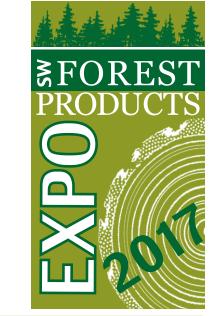




2311 Biscayne Drive Suite 206 Little Rock, AR 72227

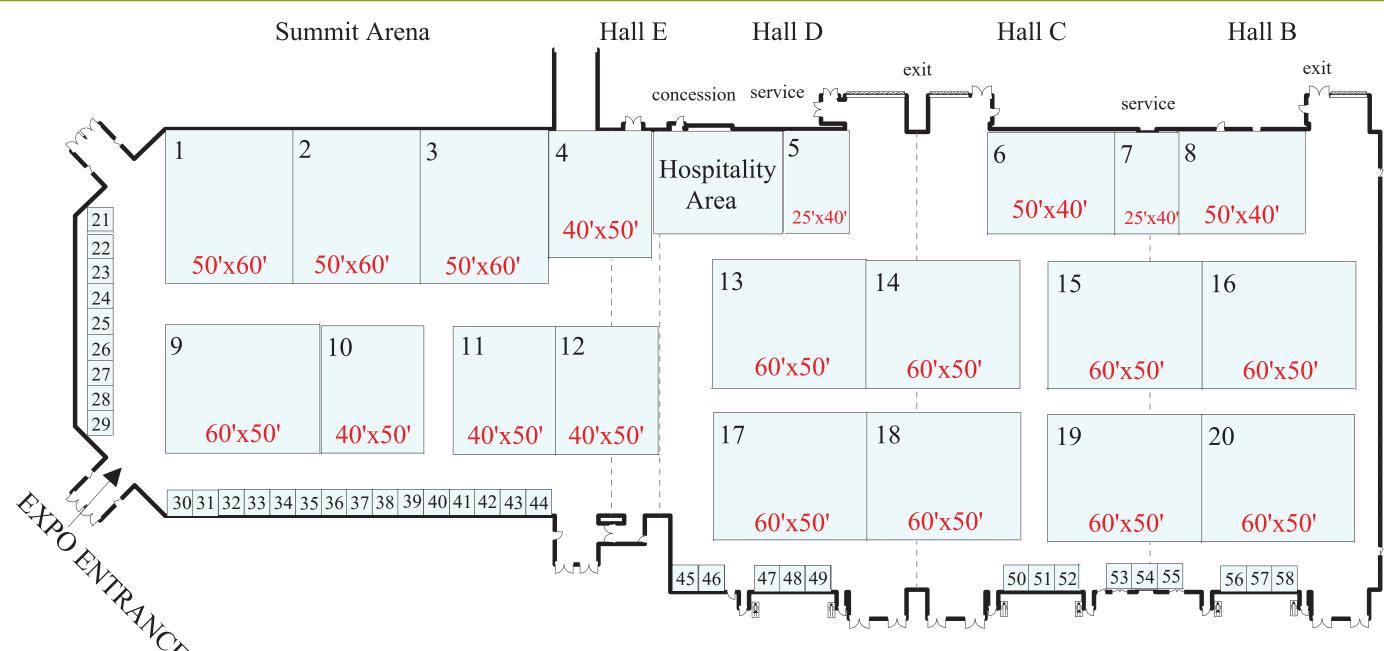
Phone: 501-224-2232

Fax: 501-224-9625





## 2017 Southwest Forest Products Expo Room Diagram



## Arkansas Timber Producers Association Southwest Forest Products Expo August 25-26, 2017 • Hot Springs Convention Center • Hot Springs, Arkansas

## EQUIPMENT AND VENDOR EXHIBIT SPACE RESERVATION FORM

Date:	Company N	Name		
Address				
City			State	Zip
Contact's Name				
Phone		Fax		
Email				
Product to Be Displayed	d (briefly describe the type of eq	uipment, products, or service	s and set-up suppo	ort required):
Signature				
Please Check Your Exhib	oit Space Below:			
Equipment Exhibit Spac Size:      # of Spaces	ces: Cost Per Space	50% Deposit Amount	Eyhihit Snace#(s	s) Requested (See Floor Plan)
3000'	\$3990	\$1995	·	nequested (See Floor Flan)
2000′	\$2980	\$1490		
1000′	\$2480	\$1240		
(Down payment of 50%	required with initial reservation	n request for an equipment sp	oace. Balance due b	oy June 24, 2017)
Booth Displays:				
10'x10'	\$660.00 (Total amount due at time of space reservation)			
Enclosed please find a c	theck in the amount of \$	in payment for	E	xhibit Space(s).
Make check payable to: Mailing Address:	Arkansas Timber Producers A 2311 Biscayne Drive, Suite 20 Little Rock, AR 72227			
Or, pay by credit card:				
Credit Card Authorizatio	on Circle One: MasterCard Vi	sa Discover Union Pay		
Card Account #:	rd Account #: Expiration Date: _			
Cardholder billing addr	ess and zip code:			(Please Print
Cardholder telephone #	<u> </u>		CVC (card valida	ation code) #·