



2019 National Home Performance CONFERENCE & TRADE SHOW

APRIL 1-4, 2019 * Sheraton Grand Chicago * Chicago, IL



2019 HPC EXHIBITOR REGISTRATION FORM

Company Information

Company / Organization Name

What does your company/organization do?

Mailing address

City

State/Prov.

Zip

Booth contact

Title

Telephone

Fax

Email

Facebook

Twitter

LinkedIn

Instagram

YouTube

Exhibit Booth

___ 10x10 Booth\$2,600 (Includes 2 registrations) ___ 10x30 Booth\$5,600 (Includes 3 registrations)

___ 10x20 Booth\$4,600 (Includes 3 registrations) ___ 20x20 Booth \$6,600 (Includes 3 registrations)

Booth Selections: 1. _____ 2. _____ 3. _____

Representative's Information*

1. Representative's name

Title

Address

Phone

Email

What do you do in the organization?

NATE: ID# _____ BPI ID# _____ Dietary Restrictions: Gluten-Free Vegan Vegetarian

2. Representative's name

Title

Address

Phone

Email

What do you do in the organization?

NATE: ID# _____ BPI ID# _____ Dietary Restrictions: Gluten-Free Vegan Vegetarian

**Please have representative information submitted by March 1, 2019*

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rev. 1.30.19

Representative's Information*

Only fill in a 3rd representative if you are registering for a 10x20, 10x30 or 20x20 booth

3. Representative's name

Title

Address

Phone

Email

What do you do in the organization?

NATE: ID# _____ BPI ID# _____

Dietary Restrictions: Gluten-Free Vegan Vegetarian

**Please have representative information submitted by March 1, 2019*

Check below if you would like to add:

___ Additional Conference Representative \$625

___ Advertise your Brand on the Conference Mobile App
(Advertisement one page) \$500

CEUs:

- American Society of Home Inspectors (ASHI)
- Building Performance Institute, Inc. (BPI) ID# _____
- International Association of Certified Home Inspectors (InterNACHI)
- National Association of the Remodeling Industry (NARI)
- North American Technician Excellence, Inc. (NATE) ID# _____

Billing Information**

Check here if the billing information is the same as the contact on the top of page 1:

Company /Organization Name

Mailing address

City State/Prov. Zip

Billing Contact

Title

Telephone

Email

Signature of Authorized Company Representative Date

***Invoice will be sent upon receipt of completed form*

Return completed form by fax or email to:

Chris Docchio
Home Performance Coalition
Director of Partner Relations
cdocchio@homeperformance.org • Fax: 412-424-0075

Questions? Please call Chris Docchio at 412-424-0046