



**AMERICAN PUBLIC TRANSPORTATION ASSOCIATION
2019 MOBILITY CONFERENCE: APTA's ENHANCED
BUS & PARATRANSIT CONFERENCE**

**Louisville, KY
May 20, 2019**

BUS DISPLAY RESERVATION FORM

Return by April 5, 2019 APTA Suite 1200 East 1300 I Street, NW Washington, DC 20005 FAX: 202-496-4331

In order to participate in the Bus Display you must be an APTA member in good standing and fully paid for the exhibit space at the staging of the event. The deadline for reservations is **April 5th. Save \$150 and be listed in the preliminary program by reserving your space by March 8, 2019.** Fees will be refunded if a request is received in writing no later than **April 26. A 20% cancellation fee will be withheld. There will be no refunds after April 26. All attendees must be registered for either the Mobility Conference or as a Bus Display only attendee.** The form to register for a Bus Display only badge can be found on our web site www.apta.com. Information on the staging of the Bus Display will follow approximately three weeks out.

BUS DISPLAY – Monday – May 20 -- 11:00am – 4:00pm

Reserve Bus Display space for the following vehicle(s):

_____ # of Buses or Vehicles shorter than 35' - \$1,675 each (Please specify length _____) \$ _____
 _____ # of Buses or Vehicles 35' - 45' - \$1,775 each (Please specify length _____) \$ _____
 _____ # of Buses or Vehicles longer than 45' - \$1,875 each (Please specify length _____) \$ _____
 _____ # of additional tent structures or refreshment areas at \$200 each \$ _____
 _____ **Deduct \$150 early bird fee – Must be reserve by 3/8/19** \$ _____

Specify vehicle type (i.e. hybrid, NGV, diesel, etc.) _____

•The fee for Bus Displays includes promotion in a special APTA 2019 Mobility Conference Products & Services/Bus Display pre-event publication. **Publication materials must be submitted by April 1st to be included.**

Web site for publication: _____

Welcome Reception – \$75.00 \$ _____
 Sunday, May 19, 2019 – 6:00pm – 7:00pm

Bus Showcase Only – \$200.00 \$ _____
 Tuesday, May 21, 2019 – 11:00am – 4:00pm (includes lunch)

TOTAL: \$ _____

Payment: ___ Check enclosed ___ Visa ___ MasterCard ___ AMEX ___ Discover
 Account No. _____ Exp. Date _____
 Cardholder's name _____

Exhibitor Badge (included with purchase of a bus space and is valid for the display ONLY)

Name _____ Title: _____
 Address: _____ City _____ State _____ Zip _____
 Email: _____ Tel: _____ Fax: _____

Please do not place me next to these companies: _____

Submitted by:

Name _____ Company _____
 Address _____ City _____ State _____ Zip _____
 Tel _____ E-mail _____

E-mail Exhibitor Information to:

Name _____ E-mail _____

If you are interested in sponsorship opportunities, please call Heather Rachels at 202-496-4838