

# ICSB 2016 World Conference

## CONFERENCE EXHIBITOR REGISTRATION

### Contact Information:

Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
Town / City: \_\_\_\_\_ Postal / Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Special Notes: \_\_\_\_\_

|   |                  |
|---|------------------|
| <b>Exhibition Space Pricing</b><br>includes skirted table, and chairs | <b>ICSB 2016</b> |
| Before March 15, 2016   | \$1,600.00 USD   |
| After March 15, 2016  | \$2,000.00 USD   |
| <b>Your selection:</b>  |                  |

**Please note: All delegates must also register as a conference attendee if they wish to attend conference sessions. This registration only provides you access to exhibitor space and meals.**

### Names of Representatives attending the booth:

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_

**Please submit this form by fax, email, or mail to the address below.**

**You will receive an invoice upon submission of your registration form.**

### ATTN:

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