

2021 NFDA International Convention & Expo Affiliate/Exhibitor Meeting Space Request Form

Meeting space is assigned on a first come, first served basis.

Contact Name							Title			
Company Name										
Mailing Address										
Phone							Fax			
Email										
Event Name										
Event Day/Date	Sunday, Oct. 17 Monday, Oct. 18 Tuesday, Oct. 19 Other									
Event Start/ End Time										
Type of Event	Busines			Other:	ther:					
Speaker/Topic	Name:				Topic:					
On-site Contact	Name:						Cell #			
	Arrival Date:		Arrival Time:		Departure Date:				Departure Time:	
Room Set Up: Check set-up types	Confere	ence: Hollo	ow Sq.	U-Shape	Classro				Rounds	Reception
Estimated # of Attendees	Who are the attendees?									
Meeting Requirements ✓All that apply	Audio Visual Internet Food &			Food & Beve	verage Other					
Special Instructions										

Email this form to the NFDA Meetings Department: David Larsen, dlarsen@nfda.org

Meeting Related Charges:

All charges are the responsibility of the requesting company or organization including, but not limited to, room rental, room set changes, food and beverage, delivery, set-up, audio visual, internet, electric services, and other meeting related charges.

Please sign to acknowledge that you have read and understand the above statement.

Signature	Date:	

For Administrative Use:									
NFDA	Approved	Denied	Date						
Name			Signature						
Comments	5								