

**COLORADO MUSIC EDUCATORS ASSOCIATION**  
**EXHIBITION REGISTRATION 2019 CLINIC/CONFERENCE**

**JANUARY 24,25,26, 2019**

**Non-profit Registration Form**

**Must be a 501(3)(C) Colorado registered non-profit, an affiliate of C.M.E.A., and active in Colorado Colleges and Universities are not eligible.**

FIRM \_\_\_\_\_ OFFICE PHONE \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

HOME/CELL PHONE \_\_\_\_\_ (in case of emergency)

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

Web Site \_\_\_\_\_

e-mail \_\_\_\_\_

NUMBER OF TABLES DESIRED \_\_\_\_\_ (Non-profit rate is \$120.00)

AMOUNT ENCLOSED \$ \_\_\_\_\_ Due Dec. 8, 2018 All CMEA affiliated non-profit exhibitors will be included in the main exhibit hall. All exhibitor rules apply. CMEA will provide a table, cover and two chairs. Access to the Exhibitors Only lounge is included. Locations will be assigned by the Exhibit Chair on a space available basis.

**NOTE: From the CMEA Board of Directors; 2019 Conference all exhibitors will receive 3 name badges for the first space and one additional badge for each additional space. All badges must have a name and title associated with the badge and badges cannot simply state " faculty or staff". If students are working an exhibit space they must have a badge with their name clearly stated on the exhibitor badge. NAMES FOR BADGES (see above)**

Make check payable to:COLORADO MUSIC EDUCATORS ASSOCIATION (C.M.E.A.) Mail payment AND this form to KEN ANDERSON 10373 ZENOBIA CT. WESTMINSTER, CO 80031 home phone:(303)-438-0364 cell phone:(303)-589-3596 FAX# (303)-832-2287 e-mail:exhibits@cmeaonline.org NO REFUNDS AFTER JAN. 5, 2019. If paying by credit card, please see form below, it must be mailed or scanned and emailed, and cannot be faxed.

## Credit Card Authorization Form

Send to: CMEA, PO BOX 18770, Denver, CO 80218

or

email to [office@cmeaonline.org](mailto:office@cmeaonline.org)

FORMS ARE NOT ACCEPTED BY FAX!!

Payments are accepted by VISA, Master Card, or Discover Card only, enter complete information on lines below for total orders/amounts of \$25.00 or more:

Name as it appears on the Credit Card:

\_\_\_\_\_  
Credit Card Number 4-digits per line:

\_\_\_\_\_  
expiration date \_\_\_\_\_

Credit Card v-code on back of card \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Credit Card Billing Zip Code \_\_\_\_\_

Phone number \_\_\_\_\_

Email \_\_\_\_\_

Signature of authorized card holder: \_\_\_\_\_

*Once your credit card is processed the Colorado Music Educators Association will attach a copy of your credit card receipt on the original paperwork and this Credit Card Authorization form will be immediately shredded. The Colorado Music Educators Association policy does not allow us to keep credit card numbers on file.*

*Cancellation refunds paid by credit card will be deducted 20% due to processing fees.*