### **EXHIBIT SPACE INFORMATION**

# DoubleTree by Hilton, Lafayette





## **Company Information**

| Company Name:  |               |                                |  |                       |
|--|---------------|--------------------------------|--|-----------------------|
| Name to be listed on the agenda and in the boo   | th:           |                                |  |                       |
| Mailing Address:   |               |                                |  |                       |
| City, State, ZIP:  |               |                                |  |                       |
| Contact:   | Title:        |                                |  |                       |
| Telephone:   | Website Link: |                                |  |                       |
| Email:   |               |                                |  |                       |
| BOOTH SIZE includes 1 Badge<br>1 skirted table, 2 chairs, wastebasket, booth sign        | QTY           | EARLY BIRD<br>(Before 12/2/25) | Regular  | Amount Due            |
| 8'x10' Without Power   |               | \$625.00                       | \$675.00   |                       |
| 8'x10' With Power  |               | \$720.00                       | \$770.00   |                       |
| Additional Exhibitor Badges  |               | \$200.00                       |  |                       |
| Reception Sponsor (Logo on marketing material) Golf Outing Sponsor                       |               | \$500.00<br>\$100.00           |  |                       |
| Golf Outing Players  |               | \$110.00                       |  |                       |
| Total Amount Due   |               |                                |  | \$                    |
| Total Allount Buc  |               |                                |  | Ψ                     |
| Sponsors that are taking advantage of the bobased on level of sponsorship and date of co | mmitme        | nt to sponsor.                 | oice of boo  | th assignment         |
| Preferred Booth(s) 1st choice 2nd choice 3rd choice  Power requested: Yes No             |               |                                |  | ks Payable To:        |
| Payment Information: Charge credit card below Send me an invoice                         |               |                                | ACTS Now Inc. PO Box 644   |                       |
| ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express  |               |                                | Conway, AF   | R 72033               |
| Card#  |               |                                | Canceling before 12/27/2025 will receive a refund, less a non-refundable |                       |
| Sec # Exp. Date:   |               |                                |  | t. No refunds will be |
| Name on Card:  |               |                                |  |                       |
| Cards Billing Address:   |               |                                | Charge will show ACTS NOW on Statement.                                  |                       |
| Amount Charged: Signature:   |               |                                |  |                       |



# **Exhibitor Badges**

# \$200 per additional person

| Primary Name         | Name             |  |  |
|----------------------|------------------|--|--|
| Company              | Company          |  |  |
| Title                | Title            |  |  |
| Mailing Address      | Mailing Address  |  |  |
| City, State, Zip     | City, State, Zip |  |  |
| Phone                | Phone            |  |  |
| Email                | Email            |  |  |
| Name                 | <br>Name         |  |  |
| Company              | Company          |  |  |
| Title                | Title            |  |  |
| Mailing Address      | Mailing Address  |  |  |
| City, State, Zip     | City, State, Zip |  |  |
| Phone                | Phone            |  |  |
| Email                | Email            |  |  |
| Golf Outing Players: | \$110 per player |  |  |
|                      |                  |  |  |
| Player 1             | Player 4         |  |  |
| Player 2             | Player 5         |  |  |
| Player 3             | Player 6         |  |  |



### **EXHIBIT HALL FLOOR PLAN**

Please refer to floor plan on the event website (<a href="www.louisiana.damagepreventionsummit.com">www.louisiana.damagepreventionsummit.com</a>) and click on "Exhibitors" tab. Indicate the first (3) booth choices on the registration form. If requested selections are not available, the next best space will be assigned. Sponsors will get first choice based on date confirmed.

### **EXHIBIT HALL HOURS**

Tuesday, January 27

1:00 PM - 5:00 PM - Exhibitor Set up

5:00 PM - 6:30 PM - Hall opens with Louisiana 811 Reception

Wednesday, January 28

7:00 AM - 6:00 PM - Exhibit Hall open

Thursday, January 29

7:00 AM - 10:00 AM - Exhibit Hall open

10:00 AM - 12:00 PM - Exhibitor teardown

### Hotel Room Reservations

Room block rates are **\$124** per night Reservations must be made by **Sunday**, **January 13**, **2026**, **to receive this rate**. Please call (800) 222-8733 – Event: Louisiana Damage Prevention Summit

Group Code: Coming Soon

Online Reservations link coming soon

Inbound Shipping Information – Coming soon

**Shipping Information –** Coming soon

Outbound - Pick-up must be scheduled by the carrier and all boxes should have labels.