Township Government

Signature:



Township Officials of Illinois 112th Annual Educational Conference November 10-12, 2019 Exhibit Participation Request (please print or type)

This request form and payment must be received in the TOI office, 3217 Northfield Dr., Springfield, IL 62702, no later than September 1 to be included in the October issue of *Township Perspective* and in the Conference Program booklet.

City	State	Zip
Phone:	Fax:	Email:
Please indicate applicabl	e category:	
Government Agency	/ TOI Associate Con	npany Member Non-member
Booth Type: (see General	Exhibit Information for size a	and cost)
Standard Booth	Additional Standard	d Booth Area Booth
made to accommodate you	ır request; however, space v	ate appropriate number. Every attempt will be will be assigned on a first-come, first-paid third choice for your booth space.
First Choice	Second Choice	Third Choice
Amount Enclosed	TOI, must accompany Particip	Check Number pation Request)
(i ayinent, inade payable to		
The following representative	tion is not known at time of	se print or type names as they should appear submitting Participation Request Form submit
The following representativon badges). If this informa	tion is not known at time of	submitting Participation Request Form submit
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