



Exhibit Booth Reservation Form

Activity 22nd Annual IMSA USA Convention

Date Saturday, May 23rd, 2026

Location: Washington, DC

Exhibit booth fee \$3000.00

Company Contact: _____

Company Name Phone: _____

Fax Email: _____

Mailing Address: _____

City/State/Zip: _____

Provide the name(s) of the company representatives who will be attending:

Payments must be made by check. Make checks payable to: IMSA USA

I acknowledge that if I reserve exhibit space and do not show up to claim the space, the exhibit fee will not be waived and is due and payable to IMSA USA

Signature: _____ Date: _____

Confirmation will be sent at a later date with set-up locations and times.

Return this form no later than **ASAP**

IMSA USA	P.O. Box 11709 Chicago, IL 60611	E-mail: imsausa.director@gmail.com
----------	--	---------------------------------------