Delta Ag Expo Corporation
APPLICATION FOR 2025 EXHIBIT SPACE

P. O. Box 1678, Cleveland, MS 38732-1678
Phone: John Michael (662) 843-8361 Cell: (601) 594-8588
email: jmb1357@msstate.edu

COMPANY NAME: _____
Contact Person: _____ Title: _____
Mailing Address: _____ City_____ State_____ Zip_____
Phone _____ Cell Phone _____ Fax_____
Email Address: _____

Product Description:
Please give a full description of the products/services you wish to exhibit and attach brochures or pictures for jury purposes. Misrepresentation may result in cancellation of space if granted on inaccurate information. _____
_____
_____
_____

Your application will be placed in one of five divisions according to the above description:

_____ (1) Equipment/Machinery Sales and Service
_____ (2) Chemical Sales
_____ (3) Seed/Fertilizer Sales
_____ (4) Service to Agriculture
_____ (5) Wildlife/Natural Resources/Conservation
_____ (6) Educational/Informational

*In your opinion, which division best describes your exhibit? (please check only one division)
The Delta Ag Expo Committee reserves the right to change your division according to your description of services.

EXHIBIT SPACE RATES:

1. Standard **Inside** Booth Space…….10′ x 10′ @ $4.25 sq.ft. = $425.00
   Inside exhibit space rental includes the following:
   - 8′ high draped backdrop
   - 3′ high side-draped booth divider
   - one standard company sign
   - one 8-foot draped table
   - two chairs
   - one waste can
   - general cleaning of exhibit hall
   - electrical outlet
2. **Outside** exhibit Space……25′ X 50′ @ $125.00
   - located in parking area adjacent to exhibit hall

SIZE INSIDE EXHIBIT SPACE REQUIRED: _____
SIZE OUTSIDE SPACE REQUIRED: _____

All applications will be reviewed each year by the Delta Ag Expo Board of Directors and exhibit space will be filled as the Executive Committee chooses to keep a desired balance and variety of exhibits. The Delta Agricultural Exposition Corporation reserves the right to refuse any application that may be made.
Sign below acknowledging that you have read and fully understand the contents of this application.

_____ _____
(Print or type name) (Signature of company representative)

RETURN APPLICATION TO: Delta Ag Expo Corporation
Attention: John Michael Blankenship
PO Box 1678
Cleveland, MS 38732

FOR SHOW MANAGEMENT ONLY:
Date Received: _____ Date Space Assigned: _____ Number Assigned: _____