

The National Association of Blacks in Criminal Justice  
**51<sup>st</sup> Annual Conference and Training Institute**  
 Hilton New Orleans Riverside  
 Two Poydras Street  
 New Orleans, LA 70130  
 July 28 – August 1, 2024



**VENDOR/EXHIBITOR REGISTRATION FORM**

**\*Each Registration includes 1 table, 2 chairs, 1 wastebasket and draping**

EXHIBIT HOURS		
Sunday, July 28 Set-up: 10 am – 12:00 pm	01:00 pm - 5:00 pm	Reception: 4:00 pm – 5:00 pm (In Vendor Area)
Monday, July 29	10:00 am - 6:00 pm	All Coffee Breaks (In Vendor Area)
Tuesday, July 30	10:00 am - 6:00 pm	All Coffee Breaks (In Vendor Area)
Wednesday, July 31	08:00 am -12:00 pm	Breakdown after 12:00 pm

COMPANY INFORMATION <i>(Please print or type)</i>			
Company Name:			
Street Address:		City:	State: Zip Code:
Office Phone: ( ) ( )	Cell Phone: ( ) ( )	Email Address:	Website:
Contact Person:	Briefly describe the nature of your company:		

**COMPANY REPRESENTATIVES AT CONFERENCE:** (Please print clearly or type names exactly as name badges should be prepared). Additional representatives may register at an additional cost of \$150.00 each.

1. Name:	Phone: ( ) ( )	Email Address:
2. Name:	Phone: ( ) ( )	Email Address:
3. Name:	Phone: ( ) ( )	Email Address:

EXHIBIT SPACE AND PRICING		
Exhibit Space	Pricing	Quantity
Vendor Booth	\$350.00	
Non-Profit Organization	\$300.00	
College/University	\$300.00	
Corporation	\$500.00	
<b>TOTAL PAYABLE TO NABCJ</b>	<b>\$</b>	

Options: Electricity required: Yes  No  (depending on hotel policy, there may be a fee for this service.)

NABCJ prefers payment in full at the time of registration. However, if this is not possible, a deposit of at least 50% is required with your registration. Full payment balance is due no later than **May 15, 2024**. For questions, call us at 919-683-1801. Please return a copy of this form with your payment to: NABCJ, P. O. Box 20011-C, Durham, NC 27707 or email to [office@nabcj.org](mailto:office@nabcj.org).

**Requests for refunds must be received by June 1, 2024, and there is a \$100 assessment fee on all refunds.**

**No Refunds will be issued after this date. On-line payments are assessed a 4% processing fee.**

<b>CREDIT CARD:</b>	<input type="checkbox"/> Visa	<input type="checkbox"/> MC	<input type="checkbox"/> Amex	<input type="checkbox"/> Discover	<b>Check payable to NABCJ (\$35 return check fee)</b>
Name on Card:	Billing Address:				
Billing Phone #: ( ) ( )	Credit Card #:	Exp. Date:	CVC:		
Email Address:	Amount charged: \$				
Signature:	Rev. 12/23				