

2025 Exhibitor Registration



Company Name (as you wish it to appear): _			
Type of Business/Products:			
Address:			
City:	State:	Zip:	
Contact:	Email:		
Phone #:	Cell Phone #:	Cell Phone #:	
Company Website:			
Please check booth size: *Register <u>and pay</u> by Oct. 1 & sa If online, u	10' x 10' - \$775.00 * ve \$75 off 10' by 10' booth an se promo code "Early75" to sa	10' x 20' - \$1,295.00 * ad \$75 off 10' by 20' booth. ave.	
Total Amount Due: \$ Pleas **If you would like to pay by cred			
IMPORTANT REQUEST COMPANY LOGO A or high-res jpeg image of your company logo services/products. We may use on social media a	o along with a one to three s	entence description of your company's	
Do you have a business colleague or partne Convention?	rs you would suggest that we	contact about exhibiting at the	
Company	Contact		
Address			
Phone	Email		

If you are using this application to register, please enclose a check and mail to:

World Baseball and Softball Coaches' Convention c/o Peak Marketing Advisors, LLC PO Box 846 Avon, CT 06001

You can also register online and pay with a credit card at www.BaseballCoachesClinic.com or www.BaseballCoachesClinic.com or www.BaseballCoachesClinic.com or

Space is limited and is subject to availability on a first-reserve & pay basis.

Thank you for your support and partnership!