

EXHIBIT SPACE APPLICATION

2025 HOTZONE CONFERENCE October 16-19, 2025 Wyndham Houston Stadium/Medical Center, Houston, Texas

Booth Payment by Mail, must be received by September 1st, 2025. (Vendor will forfeit their 2025 booth space if not received by October 1st). Please Complete This Form and Include With Check or Credit Card Information Checks should be payable to HOTZONE, Inc.

COMPANY INFORMATION				
Company Name:				
Contact Name: Mailing Address (no PO Box):			le:	
Mailing Address (no PO Box):				
City:		Sta	ate:	Zip:
City: Phone:		Fa	x:	
Contact's E-mail:				
Website Address: http://www.				
Primary Product or Service:				
COMPANY REPRESENTATIVES ATTEI	NDING			
Name:		Tit	le:	
Name:		Tit	le:	
Name:		Tit	le:	
Name: Title:			le:	
Name:		Tit	le:	
Total Representatives that will b	e attending Conference: = _			
EXHIBITOR SPACE				
Booths are 10' X 10' Pipe and Draped	. Each booth is furnished with	h a skirted table, two chair	s, trash basket, and electr	icity. The Exhibit Hall
is fully carpeted.				
# Booths	X \$1,000.00		;	۶
Sponsorship Level Desired				
CORPORATE SPONSOR	X \$5,000 (INCLUDES	S 2 10'X 10' Booths) =	:	\$
Gold Sponsor	X \$4,000 (INCLUDES	S 1 10'x 10' Booth) =		1
Silver Sponsor	X \$3,000 (INCLUDES			\$
Silver Sponsor	X \$3,000 (INCLODES	5 1 10 X 10 D00(11) -		
Bronze Sponsor	X \$1,500 =		:	\$
Total Amount Due:			:	§
METHOD OF PAYMENT				
Payment \$				
Credit Card				
Card Number:		Expiration Date:/	Security # on Back of (Card:
Name on Card	Com	npany Name	- ,	
Billing Address				
Phone Number () -				
	Discover DMC	🗆 Visa		
Check # Check	ck Date:			
Mail To:				
HOTZONE Conference, Attn: Chris	Foreman			
1500 Oak Shadows Drive, Sherwoo				

AUTHORIZATION

Exhibitor agrees to abide by all Rules & Regulations, Guidelines, and Terms & Conditions governing the **2025 HOTZONE Conference**. The individual's name that appears below is duly authorized to execute this binding contract on the behalf of named exhibitor.

Authorized Name: ____