

North Carolina Association of Municipal Electric Systems

Vendor Registration and Sponsorship Form

2025 Annual Engineering & Operations Conference & Lineman's Rodeo

May 13-15, 2025

The Rocky Mount Event Center – Rocky Mount, NC

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Cell: _____

Contact Email: _____ Phone: _____

Please list **ALL** Attendees:

- | | |
|----------|----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |
| 5) _____ | 6) _____ |

Requested Display Location Choices: Inside: 1) _____ 2) _____ 3) _____

Outside: 1) _____ 2) _____ 3) _____

Door Prizes: _____

			Quantity				
			Inside	Outside			
Attendance	Wednesday	Primary Display Booth:			\$550		
		Additional Display Booth(s):			\$250		
		Additional Display Table(s):			\$50		
		Additional Chairs (2 included w/Booth):			\$3		
		Electric Access:			\$0		
	Thursday	Display at Rodeo Only:			\$550		
		Display in Addition to Wednesday:			\$300		
			Additional Attendees:			\$100	
			Annual Meeting/Rodeo Awards Dinner Attendees:				
			Late Registration Fee (After April 1, 2025)			\$250	

North Carolina Association of Municipal Electric Systems

		QUANTITY:	PRICE:		
Sponsorships		Diamond (Includes 5 Attendees, 1 Display, Recognition):	\$4,000		
		Platinum (Includes 4 Attendees, 1 Display, Recognition):	\$3,000		
		Gold (Includes 3 Attendees, 1 Display, Recognition):	\$2,000		
		Silver (Includes 2 Attendees, 1 Display, Recognition):	\$1,000		
		Rodeo Outerwear:	\$5,000		
	Meals		Vendor Luncheon:	\$6,000	
			Dessert Break:	\$1,500	
			Utilities Directors Dinner		
			Rodeo Judges Breakfast:	\$1,000	
			Rodeo Lunch:	\$5,000	
			Rodeo/Awards Social:	\$8,000	
	Golf Sponsorships		Contact: _____ Phone #: _____		
			4-Person Team (Limit 25):	\$300	
			Practice Range/ Starting Area:	\$200	
			Putting Green:	\$200	
			Hole/ Tee Sponsorship:	\$200	
			Lunch:		
			Snacks:		
			Drinks:		
	Sporting Clay Sponsorships		Contact: _____ Phone #: _____		
			4-Person Team:	\$500	
			Shooting Station:	\$100	
			Practice Range:	\$100	
			Lunch:		
			Snacks:	\$100	
			Drinks:	\$100	
			Score Board:	\$100	
			1st Place Best Shooter Plaque:	\$30	
		2nd Place Best Shooter Plaque:	\$30		
		3rd Place Best Shooter Plaque:	\$30		
		(2) 1st Place Team Member Gift Cards (\$50 Each):	\$100		
		(2) 1st Place Team Member Gift Cards (\$50 Each):	\$100		
		2nd Place Team Member Gift Cards (\$25 Each):	\$100		
		3rd Place Team Member Gift Cards (\$15 Each):	\$60		

Total Due to NCAMES by April 1, 2025 _____

Method of Payment:

Check Payable to **NCAMES** and Mailed to:

NCAMES
 C/O: Gail Boggs
 Fayetteville PWC
 P.O. Box 1089
 Fayetteville, NC 28302-1089

Cardholder Name: _____

Card Number: _____

Exp. Date: _____ Billing Zip: _____

CVV Code (3 Numbers On Back of Card): _____

Credit Card (3.5% and \$0.15/transaction)

Visa

MasterCard Fee: _____

American Express

Amount to Charge to Card: \$ _____

Signature: _____