PEERS/IBBC 2020 Exhibitor/Sponsor Registration

Exhibitor Registration Information
Thank you for exhibiting/sponsoring at the TAPPI PEERS/IBBC. Pre-register your booth personnel by faxing the completed Exhibitor Registration Form to +1.770.209.7206 by October 30, 2020. Changes or corrections to personnel can be made by contacting the PEERS/IBBC Registration Department at 1.800.332.8686 (US), 1.800.446.9431 (Canada), +1.770.446.1400 or via e-mail at memberconnection@tappi.org.

All PEERS/IBBC 2020 Exhibitors/Sponsors must register all staff and employees that will be attending the virtual conference. This includes exhibitors utilizing complimentary registrations; names & emails MUST be submitted in order to receive the event access link. Please see below for what is included in your exhibit/sponsorship purchase.

<table>
<thead>
<tr>
<th>Category</th>
<th>Complimentary Full Conference</th>
<th>Complimentary Exhibit Personnel</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Gold Sponsor</td>
<td>4</td>
<td>Unlimited</td>
</tr>
<tr>
<td>B. Silver Sponsor</td>
<td>2</td>
<td>Unlimited</td>
</tr>
<tr>
<td>C. Exhibitor</td>
<td>1</td>
<td>Unlimited</td>
</tr>
</tbody>
</table>

Questions? Contact TAPPI’s PEERS/IBBC Registration Department 1.800.332.8686 (US) • 1.800.446.9431 (Canada) • +1.770.446.1400, memberconnection@tappi.org
2020 PEERS/IBBC Exhibitor/Sponsor Registration Form

Fax Completed Form to +1.770.209.7206

Step 1: Contact Information
Exhibiting Company _____________________________________________________________
Contact Name _________________________________________________________________
Address _________________________________________________________________________
City/State/Zip/Country ____________________________________________________________
Phone_________________________________Email______________________________________

Step 2: Company Representatives (Please print clearly FIRST NAME, LAST NAME & E-MAIL ADDRESS)

1. First Name__________________Last Name____________________Email__________________________
   □ Comp Exhibit Personnel
   □ Full Conference

2. First Name__________________Last Name____________________Email__________________________
   □ Comp Exhibit Personnel
   □ Full Conference

3. First Name__________________Last Name____________________Email__________________________
   □ Comp Exhibit Personnel
   □ Full Conference

4. First Name__________________Last Name____________________Email__________________________
   □ Comp Exhibit Personnel
   □ Full Conference

Step 3: Payment Due
Comp Exhibit Personnel Badges ______
Full Conference: $379 (Member Rate) / $499 (Non-Member Rate) x ______ = ______
TOTAL DUE: $__________

Step 4: Payment Methods
1. Credit Card - □ AMEX □ Diner’s Club □ Discover □ MasterCard □ Visa
   Card Number ________________________________ Expiration Date ______________
   Cardholder’s Name ____________________________

2. Check in U.S. Funds: Mail check with form to: TAPPI Inc., PO Box 933644, Atlanta, GA 31193-3644 USA

3. Wire Transfer: Contact TAPPI’s Member Connection Center for bank information
   Date of Transfer:______________ Amount US$_______