



**PAMIC's**  
**100<sup>th</sup> Anniversary Convention**  
**August 5 – 7**  
**Rocky Gap Resort**  
**Flintstone, Maryland**

## **Exhibit Show Information**

### **Why Your Organization will want to participate:**

- ❖ Exposure during entire convention – Exhibit area is in the lobby of Convention meeting rooms!
- ❖ Recognition in Convention materials
- ❖ Exposure to decision makers from property and casualty mutual insurance companies
- ❖ Recognition on PAMIC's Website
- ❖ Access to attendee list prior to Convention

### **Who will attend the 2007 PAMIC Convention:**

PAMIC Convention attendees include officers and directors of property and casualty mutual insurance companies. In addition to Pennsylvanians, insurers from New York, New Jersey, Virginia, West Virginia and Maryland will likely be in attendance as well.

### **As a Registered Exhibitor the following are included:**

Name Badge with Exhibitor Identification  
Continental Breakfast and Refreshment Breaks on Monday & Tuesday  
Access to the PAMIC Convention Attendee List  
Invitation to Golf Outing on Aug. 7  
One 8 ft draped table with two chairs

### **Exhibitors are invited to attend the entire Convention**

Your Exhibit Show Registration includes a Convention Registration for one exhibitor only. Additional representatives are invited to register for the Convention if they wish to attend any of the Convention events and sessions.

### **Exhibit Area:**

The Exhibit Hall will be located in the Greenridge Ballroom Lobby. All Convention Sessions are located in rooms that enter through this Lobby. That means that every attendee will pass by the Exhibit Area every time they're on their way to a session! Refreshment breaks and Continental Breakfasts will also take place in the Lobby.

Exhibit tables are eight feet long. Each exhibitor will have space to do one tabletop exhibit.

### **Mailing Your Exhibit Materials**

Your Exhibit Materials may be mailed to the Resort to arrive no earlier than July 31. Please mark all boxes with "PAMIC AUGUST 5" in addition to the box number (i.e. Box 1 of 2; Box 2 of 2).

Please mail your materials to:

Kimberly Tulp, Rocky Gap Resort, 16701 Lakeview Road N.E., Flintstone, MD 21530

**Registration for the PAMIC 2007 Exhibit Show  
is on a first come first serve basis!  
Space is limited to 12 tabletop exhibits.  
All requests for exhibit space must be paid for by June 11, 2007**

**Exhibit Show Set Up Hours:**

Sunday, August 5

Set Up after 2:00 p.m.

Monday, August 6

Set Up before 8:00 a.m.

**Convention Registration:**

Convention Registration will take place in the Hotel Lobby on Sunday, August 5, from 4:00 – 6:00 p.m. and Monday morning in the Greenridge Ballroom Foyer.

**Exhibit Show Hours:**

Monday – August 6

8:30 - 12:30 a.m.

(General Session begins at 9:00 with refreshment break from 10:20 – 10:45.)

Tuesday – August 7

7:30 AM – 10:30 a.m.

(Breakout Sessions begin at 8:00 with refreshment break from 10:15 – 10:45.)

**Security:**

Because the Exhibit Hall is in the Lobby area, it is not a secure location so please do not plan to leave valuables (laptops, money boxes, etc.) behind.

**Breakdown of Exhibits:**

Tuesday – August 7

After 10:45 a.m.

**Electric and Internet Hookups**

Electric and Internet Hookups are available upon request. There is no fee for electric hook up and the Resort offers wireless Internet. A direct line to the Internet is available for \$20.

**Room Reservations**

The PAMIC room rate at the Rocky Gap Resort is \$139.00 single or double. Rates are guaranteed through July 10, 2007. Call 1-800-724-0828 now to reserve your room. Be sure to mention that you are with the PAMIC Convention in order to receive the guaranteed rate.

**For more information, please call Marri Lamoureaux at 717-303-0197  
or email [mlam@pamic.org](mailto:mlam@pamic.org).**

**2007 PAMIC Convention Exhibit Show  
Registration Form  
August 5-7  
Rocky Gap Resort, Flintstone, MD**

**Please complete the following information:**

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Web-site:** \_\_\_\_\_

**Exhibit Show Representative:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Attach or email a brief description – 100 words or less - of your company's services. This description must be to PAMIC by July 10 to be included in Convention materials.**

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We hereby apply for a tabletop exhibit space for our use at the 2007 PAMIC Convention. We agree to pay the fee as listed and understand that exhibit spaces will be assigned in the order in which payment is received.

We acknowledge that a tabletop exhibit space consists of one draped 8 ft. table and two chairs.

We request PAMIC to allocate to us what is considered the best of available remaining spaces. We understand that this application becomes a contract when submitted by us and accepted by PAMIC and we agree to submit payment for the tabletop exhibit by June 11, 2007. If payment is not submitted by that time, we understand that PAMIC is not obligated to hold our reservation.

**CANCELLATION/DEADLINE POLICY:** We understand that a refund of the paid exhibit fee minus a \$25.00 administrative fee will be made if cancellation is requested prior to June 11, 2007. Cancellations made after June 11, 2007 may not be eligible for a refund!

**We request that our tabletop exhibit space not be adjacent to:**

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(PAMIC will do its best to comply to all requests, however a guarantee can not be made.)



**2007  
PAMIC Convention  
Exhibit Show**

**Exhibitor Registration Fees**

Name of Company: \_\_\_\_\_

**Exhibit Show Registration - includes Convention Registration for one exhibitor:**

*\$495.00 Member*

*\$595.00 Non-Member*

Name of exhibitor to register for Convention \_\_\_\_\_

**Additional Representatives per Existing Booth if additional reps are not registering for Convention**

*\$50.00 each*

Name of Representative \_\_\_\_\_

Name of Representative \_\_\_\_\_

**Additional Representatives Per Existing Booth** *No additional cost if additional representatives are also registering for Convention – use Convention registration form.*

Name of Representative \_\_\_\_\_

Name of Representative \_\_\_\_\_

Please provide Electric Hookup at no charge.

Please provide Internet Hookup at \$20. (Wireless Internet is available throughout the hotel.)

**Total Amount Enclosed \$** \_\_\_\_\_

Please submit these forms along with payment to:

PAMIC  
1017 Mumma Road Suite 103  
Wormleysburg, PA 17043

Phone: 717-303-0197

Fax: 717-303-1501

**[www.pamic.org](http://www.pamic.org)**