



Product Gallery Registration and Preferred Placement

El Paso Zoo

4001 E. Paisano Dr. | El Paso, Texas

January 23, 2019 | 6:00 pm – 9:30 pm

Product Gallery Table Registration

Texas Floral Education Underwriters at the Platinum and Gold level receive one 6-foot Product Gallery Table and one dinner reservation as part of their Underwriter participation. The Platinum level underwriters receive the information 14 days prior to general release. The Gold level underwriters receive the information 10 days prior to general release. The Silver level underwriters receive the information 4 days prior to general release.

_____ I am a Texas Floral Education PLATINUM Underwriter receiving one Product Gallery Table with *Preferred Placement*. This Product Gallery Table Reservation includes one dinner reservation.

_____ I am a Texas Floral Education GOLD Underwriter receiving one Product Gallery Table with *Preferred Placement*. This Product Gallery Table Reservation includes one dinner reservation.

_____ I am a Texas Floral Education SILVER or BRONZE underwriter and choose the El Paso Showcase as one of the Free Product Gallery Tables made available to my company as an underwriter. This Product Gallery Table reservation includes on dinner reservation.

_____ I am a Texas Floral Education SILVER or BRONZE Underwriter and wish to reserve one Product Gallery Table at a cost of \$125. This Product Gallery Table Reservation includes one dinner reservation.

Product Gallery Table Placements are based on Underwriter Levels, Date of Reservation, and Availability.

Additional Dinner Reservations

Please reserve _____ additional dinner reservations for Texas Floral Education Underwriter and TSFA Members at \$56.25 per reservation, \$75 for non-members.

Product Gallery and Additional Reservation Information

Attendee Name _____ Company Name _____

Company Address _____ City _____ State _____ Zip _____

Company Phone _____ Email Address _____

Please note the names of Additional Dinner Reservations

1 _____ 2 _____ 3 _____

Preferred Method of Payment

Product Gallery Table Expense \$ _____ Additional Dinner Reservations \$ _____

Total \$ _____

Mail check to Texas State Florists' Association | PO Box 859 | Leander, TX 78646 | email to txsfa@sbcglobal.net

Credit Card # _____ Code _____ Expiration Date _____ Zip _____