

SPONSORSHIP REGISTRATION

IP Casino & Resort, Biloxi

Wednesday, November 4 – Friday, November 6, 2026



Company Information

Company Name: _____

Name to be listed on agenda and in booth: _____

Mailing Address: _____

City, State, ZIP: _____

Contact: _____ Title: _____

Telephone: _____ Website Link: _____

Email: _____

SPONSORSHIP	QTY	Amount	Amount Due
Platinum (Double booth, 6 Badges, 4 Golf Spots, Golf Hole Sponsorship, Logo on marketing material)		\$7,500	
Gold (Single booth, 4 Badges, 3 Golf Spots, Logo on marketing material)		\$5,000	
Silver (Single booth, 2 badges, 2 Golf Spots, Logo on marketing material)		\$2,500	
Bronze (Single booth, 1 Badge, Logo on marketing material)		\$1,500	
Reception (Logo on marketing material)		\$ 500	
Additional Sponsor Badges		\$ 250	
Golf Outing Sponsor		\$100	
Golf Outing Players		\$ 110	
Total Amount Due			\$

Sponsors that are taking advantage of the booth space will get first choice of booth assignment based on level of sponsorship and date of commitment to sponsor.

Preferred Booth(s) 1 st choice	2 nd choice	3 rd choice
Power requested: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Payment Information: <input type="checkbox"/> Charge credit card below <input type="checkbox"/> Send me an invoice		
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> American Express		
Card#		
Sec #	Exp. Date:	
Name on Card		
Cards Billing Address:		
Amount Charged:	Signature:	

Make Checks Payable To:
ACTS Now Inc.
PO Box 644
Conway, AR 72033

Canceling before **10/5/26** will receive a refund, less a non-refundable \$100 deposit. No refunds will be issued after this date.

Charge will show ACTS NOW on Statement.

Sponsor Badges

\$250 per additional person

 Primary Name

 Company

 Title

 Mailing Address

 City, State, ZIP

 Phone

 Email

 Name

 Company

 Title

 Mailing Address

 City, State, ZIP

 Phone

 Email

 Name

 Company

 Title

 Mailing Address

 City, State, ZIP

 Phone

 Email

 Name

 Company

 Title

 Mailing Address

 City, State, ZIP

 Phone

 Email

Golf Outing Players:

\$110 per player

 Player 1
 _____ P
 Player 3

 Player 2

 Player 4

EXHIBIT HALL FLOOR PLAN

Please refer to floor plan on the event website (www.mississippi.damagepreventionsummit.com) and click on “Exhibitors” tab. Indicate the first three (3) booth choices on the registration form. If requested selections are not available, the next best space will be assigned. Sponsors will get first choice based on date confirmed.

NEW EXHIBIT HALL HOURS

Wednesday, November 4

1:00 PM – 5:00 PM – Exhibitor Set up

5:00 PM – 7:00 PM – Exhibit Hall open for Summit Reception

Thursday, November 5

7:00 AM – 9:45 AM – Breakfast with Exhibitors

10:00 AM – 4:30 PM – Exhibit Hall closed

4:30 PM – 6:30 PM – Exhibit Hall open for Reception

Friday, November 6

7:00 AM – 8:50 AM – Breakfast with Exhibitors

9:00 AM – 11:00 PM – Exhibitor tear down

Hotel Room Reservations

Room block rates are \$ per night

Reservations must be made by

Please call (888) 946-2847 #1

Group Code:

Online Reservation link coming soon