

Chapter Display Reservation Form



44.25" x 31.25" Collapsible Table Top Display Unit

Dates of event: _____

Ship to: (Street Address Only, No P.O. Boxes)

Chapter Name: _____

Contact Name: _____

Address: _____

City: State/Province: Zip _____

Phone: _____

E-mail: _____

I agree to return the above display to ARMA International within two weeks of the end of the event and to insure the shipment for \$1,000. I understand that if I do not return the display and graphics to ARMA International in the same condition in which they were received, ARMA International reserves the right to charge the chapter for their repair or replacement.

Signature: _____

Title _____ Date: _____

Please email to: chapters@armaintl.org